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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I200000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

FOREIGN PROFIT/NONPROFIT CORPORATION

UNIMARK LOWBOY TRANSPORTATION, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR 27 PM 1:43

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09 MAR 27 PM 4:44

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DEPARTMENT OF STATE

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. Unimark Lowboy Transportation, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Wisconsin 3. 71-1023356
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/06/2007 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 10801 Corporate Drive, Pleasant Prairie, WI 53158
(Principal office address)

10801 Corporate Drive, Pleasant Prairie, WI 53158
(Current mailing address)

8. Any and all business allowed by the state.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Doreen Wallace **Doreen Wallace**
(Registered agent's signature) **Assistant Vice President**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: James S. Johnston

Address: 2900 Davis Boulevard, Suite 103, Joplin, MO 64804

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: James S. Johnston

Address: 2900 Davis Boulevard, Suite 103, Joplin, MO 64804

Vice President: Mike Milton

Address: 10801 Corporate Drive, Pleasant Prairie, WI 53158


Asst. Secretary: Christopher H. Rechl

Address: 10801 Corporate Drive, Pleasant Prairie, WI 53158

Treasurer: Russell Harbach
and Secretary

Address: 10801 Corporate Drive, Pleasant Prairie, WI 53158

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Christopher H. Rechl, Assistant Secretary
(Typed or printed name and capacity of person signing application)

United States of America
STATE OF WISCONSIN
Department of Financial Institutions

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator of the Division of Corporate & Consumer Services of the Department of Financial Institutions, do hereby certify that

UNIMARK LOWBOY TRANSPORTATION, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 6, 2007.

I further certify that said corporation or limited liability company has, during its most recently completed report year, filed with this department an annual report required by sec. 180.1622, 180.1921, 181.1622 or 183.0120 of the Wisconsin Statutes; and that said corporation or limited liability company is not the subject of a proceeding under sec. 180.1421, 181.1421 or 183.09025 of the Wisconsin Statutes for administrative dissolution and that no determination has been made that grounds exist for such action; that no filing has been made with this department of a decree of dissolution with respect to the corporation or limited liability company under sec. 180.1433, 181.1433 or 183.0902 of the Wisconsin Statutes; and that the corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the official seal of the Department on March 27, 2009.

RAY ALLEN, Deputy Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY:

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

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