# F99999913649

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	isiness Entity Nar	me)
, (Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200157129442

06/16/09--01042--008 \*\*70.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

7591 JUN 30 P 1: 118



### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

June 17, 2009

ROBIN SWEENEY PLASTI-FAB, INC. P. O. BOX 100 TUALATIN, OR 97062

SUBJECT: PLASTI - FAB, INC. Ref. Number: W09000028281

We have received your document for PLASTI - FAB, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham Regulatory Specialist II New Filing Section

Letter Number: 909A00020548

## **COVER LETTER**

COVER LETTER  TO: New Filing Section Division of Corporations		
The state of the s		
COVER LETTER		
TO: New Filing Section		
SUBJECT: Plasti-Fab, Inc.		
Name of corporation - must include suffix		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Robin Sweeney  Name of Person  Plasti-Fab, Inc.  Firm/Company  Po Box 100		
Name of Person		
Plasti-Fab, Inc.		
Firm/Company		
Po Box 100		
Address		
Tualatin, or 97062  City/State and Zip code  robins@ plasti-fab. com  E-mail address: (to be used for future annual report notification)		
City/State and Zip code		
robins@plasti-tab.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Robin Sweeney at (503) 692-5460  Name of Person Area Code & Daytime Telephone Number		
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
New Filing Section  New Filing Section		
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314		
Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\ \text{S78.75 Filing Fee & }\ \text{Certificate of Status}\$\$ Certified Copy \$\ \text{Certified Copy}\$\$ Certified Copy		

## 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. (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) Oregon
(State or country under the law of which it is incorporated)

3. 93-0582019
(FEI number, if applicable) 4. June 2, 1969
(Date of incorporation)

5. perpetual
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7.9665 SW Tualatin Sherwood Rd, Tualatin, OR 97062
(Principal office address) PO Box 100, Tualatin, OR 97062 (Current mailing address) 8. <u>Manufacture Water and Wastewater Products</u>
(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) Mary Ang Costanzo Name: 4949 Raymond Industrial Drive Lakeland, Florida 33815 (City) (Zip code) Office Address: 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,

(Registered agent's signature)

and I am familiar with and accept the obligations of my position as registered agent.

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.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Randall R. Thom
Address: 621 NW 1/th Ave
Portland, OR 97209
Vice President: Larry Richardson  Address: 3969 NE 41st Ave.
Address: 3969 NE 4/s+ Ave.
Portland, OR 9722.
Secretary: Larry Richardson
Address: 3969 NE 41st Ave. Portland, OR 97212
Treasurer: Larry Richardson
Address: 3969 NE 41st Ave. Portland, DR 97212
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. LARRY & RICHARDS ON - V. P. OPERATIONS
(Typed or printed name and capacity of person signing application)

## CERTIFICATE

## State of Oregon

## OFFICE OF THE SECRETARY OF STATE Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

#### PLASTI-FAB, INC.

was

incorporated under the Oregon

**Business Corporation Act** 

on

June 2, 1969

and is active on the records of the Corporation Division as of the date of this certificate.

SEGRETARY OF STATE

· Formerg

269 JUN 30 P 4: 48



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

KATE BROWN, Secretary of State

 $R_1$ 

Jodi Horsberg

May 18, 2009

Come visit us on the internet at http://www.filinginoregon.com FAX (503) 378-4381