

F09000003758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000160812750

09/21/09--01038--003 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 21 PM 4:21

APPROVED
AND
FILED

VH

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DENNIS UNIFORM MFG. CO.
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:

GARY A. NEES
Name of Person

DENNIS UNIFORM MFG. CO.
Firm/Company

714 N.E. HANCOCK STREET
Address

PORTLAND OR 97212
City/State and Zip code

LAC @ DENNISUNIFORM.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY A. NEES at (503) 238-7123
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & 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.

1. DENNIS UNIFORM MFG. CO.
(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. OREGON 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 18 MAY 1953 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NOT KNOWN
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 714 N.E. HANCOCK STREET
(Principal office address)
PORTLAND, OR 97212
(Current mailing address)

8. SALE OF SCHOOL UNIFORM
(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: RONA CASTIGLIONE

Office Address: 7715 APOKA BLVD

APOKA, Florida 32703
(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.


(Registered agent's signature)

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.

APPROVED
AND
FILED

09 SEP 21 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

09 SEP 21 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: JOHN SHIPLEY

Address: 714 NE. HANCOCK STREET
PORTLAND, OR 97212

Vice Chairman: _____

Address: _____

Director: JOAN SHIPLEY (AND V.P.)

Address: SAME

Director: _____

Address: _____

B. OFFICERS

President: THOMAS SHIPLEY

Address: SAME

Vice President: AL ZINDEL - EXEC. V.P.: OPERATIONS

~~Vice Pres.~~ BARBARA LANGLEY - EXEC. V.P.- SALES

SAME ADDRESS

Secretary: GARY A. NEES - E.V.P.-FINANCE & ADMIN., SECY & TREASURER

Address: SAME

Treasurer: GARY A. NEES

Address: SAME

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

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

14. GARY A. NEES E.V.P.-FINANCE & ADMIN., SECY & TREAS.
(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:

DENNIS UNIFORM MFG. CO.

was

incorporated

under the Oregon

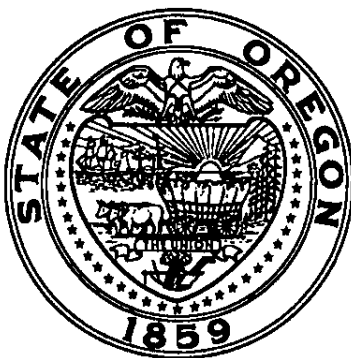
Business Corporation Act

on

May 18, 1953

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

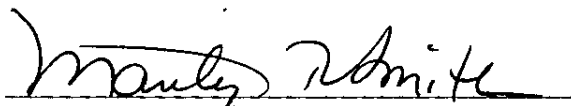
APPROVED
AND
FILED
09 SEP 21 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

KATE BROWN, Secretary of State

By



Marilyn R. Smith

August 26, 2009