# F100000000119

(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:	7
Marsha Freund com	
AUTHORIZATION BY PHONE TO	1
GORRECT Name	
DOC EXAM VI	
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Office Use Only



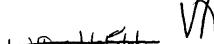
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04/02/10--01024--001 \*\*70.00

SECRETARY OF STATE
TALLAHASSEE. H ORINA





### **COVER LETTER**

	ew Filing Sec vision of Co			
SUBJEC	Т:Р.Т	. Service Corporation		
		(Name of corpor	ration - must include suffix)	
Dear Sir or	r Madam:			
"Certificat		tion by Foreign Corporation e," and check are submitted rida.		
Please retu	rn all corres	oondence concerning this ma	atter to the following:	
Mars	ha L. Fre	und, Controller		
		(Nam	e of Person)	<del></del>
Pack	aging Tec	hnologies, Inc.		
		(Firm	/Company)	
807	West Kimb	erly Road		
			Address)	
Dave	enport, IA	52806		
			ate and Zip code)	
For further	information	concerning this matter, plea	se call	
1 Of further	mornation	concerning this maker, piece	oc carr.	
Mars	sha L. Fre	und at ( 56	391–1100	
(1)	lame of Pers	on) (Ai	rea Code & Daytime Teleph	one Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	llahassee, FL s a check for	. 32301 the following amount:		
		<u>-</u>	<b>a</b> decrease of the contract o	Signa sa puta di s
\$70.00	Filing Fee	☐S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	□\$87.50 Filing Fee, Certificate of Status & Certified Conv



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 5, 2010

MARSHA L. FREUND PACKING TECHNOLOGIES, INC. 807 WEST KIMBERLY ROAD DAVENPORT, IA 52806

SUBJECT: P.T. SERVICE CORPORATION

Ref. Number: W10000016566

We have received your document for P.T. SERVICE CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$Total fees due: \$2,000.00.

Total fees due: \$2,000.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 010A00008247

## 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. P.T. Service Corporation (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co," or "Corp.") P.T. SERVICE OF IOWA CORPORATION (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 42-1426511 (State or country under the law of which it is incorporated) 2. (FEI number, if applicable) 5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual") 8/1/1994 (Date of incorporation) 1/1/2000 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 807 West Kimberly Road (Principal office address) Davenport, IA 52806 (Current mailing address) Performance of machinery start up and service related work. (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) Peter L. Perkins Name: STANWYCK CIRCLE Office Address: , Florida 33626 (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.
- 12. Names and business addresses of officers and/or directors:



# A. DIRECTORS

hairman:	10 MAY -4 PM 2: 25
ddress: <b>OYS</b>	TAR Holding GmbH  SECRETARY OF STATE TALLAHASSEE TO SEE
Lore	enzstrabe 6, 76297, Stutensee, Germany TALLAHASSEE FLORIDA
ice Chairman:	Barry W. Shoulders
lldress:	807 West Kimberly Road
<u> </u>	Davenport, IA 52806
rector	
idress:	
rector:	
idress:	
•	
OFFICERS	
esident:	Barry W. Showlders
ldress:	807 West Kimberly Road
	Davenport, IA 52806
ce President:	
ldress:	807 West Kimberly Road
<u> </u>	Davenport, IA 52806
cretary:	Suzanne G. Zeitler
ldress:	807 West Kimberly Road, Dayenport, IA 52806
	Suzanne G. Zeitler
ldress:	807 West Kimberly Road, Davenport, TA 52806
OMER. LC	A see the season of the seed to the seed that the listing additional office we and/or dispersions
OFE: II necessa	ary, you may attach an addendum to the application listing additional officers and/or directors.
), <u></u>	(Signature/of) Director or Officer listed in number 12 of the application)
1	Suzanne G. Zeitler, Secretary Treasurer  (Typed or printed name and capacity of person signing application)



10 MAY -4 PM 2: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## SECRETARY OF STATE

Date: 3/17/2010

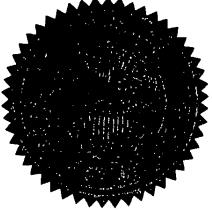
#### CERTIFICATE OF EXISTENCE

Name: P.T. SERVICE CORPORATION (490 DP - 177500)

Date of Incorporation: 7/28/1994

**Duration: PERPETUAL** 

I, MICHAEL A. MAURO, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report required has been filed by the Secretary of State, and that articles of dissolution have not been filed.



Mugael A. Maure

