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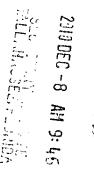
| (Requestor's Name) |
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| (Address) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Cassial Instructions to Filip Officer |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| _ | Division of Corporations | | | | | | | |
|------------------|---|--------------|----------|------------|------------------------------|--|--|-------------|
| SUBJE | CT: | The | e Comi | bination | Door Co. | | | |
| | | Name of co | rporatio | n - must | t include su | ıffix | | |
| Dear Sir | or Madam: | | | | | | | |
| "Certification | osed "Application by Fore ate of Existence," or "Cert Terenced foreign corporation | ificate of G | ood Sta | anding" a | and check a | Fransact Business in tre submitted to reg | n Florida | ì," |
| Please re | turn all correspondence co | ncerning th | is matt | er to the | following: | | | |
| | | Anı | n Wues | st | | | | |
| | | 1 | Name o | f Person | | | | |
| | | he Combi | nation | Door Co | o . | | | |
| | | F | irm/Co | mpany | | | | |
| | 1000 | Morris St | reet, P | .O. Box | 1076 | | | |
| | | | Add | lress | | | | |
| | Fond du Lac | | | | WI | 54936-1076 | | |
| | | Cit | y/State | and Zip | code | | | |
| | | uest@com | | | | | 1 | ~ |
| | E-mail a | iddress: (to | be used | l for futu | re annual r | eport notification) | | ت |
| For furth | er information concerning | this matter | , please | call: | | | Contract of the contract of th | 0EC -8 |
| | Ann Wuest | at (| 92 | | • | 2-2050 | [+, | \supseteq |
| 1 | Name of Person | | Area | a Code & | Daytime | Telephone Number | | 94:6 |
| N E C 2 | TREET/COURIER ADI New Filing Section Division of Corporations Clifton Building 661 Executive Center Circ Callahassee, FL 32301 | | | | New Fi Divisio P.O. Bo | ING ADDRESS: ling Section n of Corporations ox 6327 ssee, FL 32314 | | |

\$78.75 Filing Fee & Certificate of Status

\$70.00 Filing Fee

\$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. I 503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| • | The Combina | ition Door Co. | | | | |
|-------------------|---|---|---|---------------------|---------------------|-----------|
| | orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.") | O," "COMPANY | /," "CORPOR | ATION," | | |
| (If name unavaila | ible in Florida, enter alternate corporate nam | ne adopted for the | purpose of tra | nsacting b | usiness in Florida) | |
| | Wisconsin | B | 39-0219330 | | | |
| (State or country | under the law of which it is incorporated) | | 39-0219330 (FEI number, if applicable) | | ble) | |
| | 04/08/1912 | i . | perpetual | | | |
| (Date | 04/08/1912 5 of incorporation) | (Duration: Y | perpetual (Duration: Year corp. will cease to exist or "perpetual") | | | |
| | 01/01 | /2008 | | | | |
| • | (Date first transacted business (SEE SECTIONS 607.1501 & 607. | in Florida, if pri 1502, F.S., to de | or to registration | on) / liability) | | |
| 100 | 0 Morris Street, P.O. Box 1076 | Fon | d du Lac | WI | 54936-1076 | |
| | (Principal office ad | idress) | | | | |
| 100 | Morris Street, P.O. Box 1076 | Fon | d du Lac | WI | 54936-1076 | |
| | (Current mailing ac | idress) | | | | |
| Combination | Doors | | | | | |
| · |) of corporation authorized in home state or | | | | | 2 |
| (Purpose(s | of corporation authorized in home state or | country to be car | ried out in state | e of Florida | 1 : ~ | Ξ. |
| . Name and stree | t address of Florida registered agent: (P | O. Box NOT | acceptable) | | | ט טיבט |
| Name: | National Corporate Research, Ltd | ., Inc. | | | | t |
| Office Address: | 515 East Park Avenue | | | | AT C. | |
| | 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.

Walnung E- Mouleus, VP of NCR (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

| Chairman: | David Sch | midt | |
|--|--|-------------------------------|------------------|
| Address: | 33 Harbour Gre | en Drive | |
| | Key Largo | Florida | 33037 |
| Vice Chairman: | | | |
| Address: | | | |
| Director: | Daniel A. Sc | hmidt | |
| | 948 Golf Vu | | |
| | Fond du Lac | WI | 54935 |
| | | | |
| | | | ··· |
| B. OFFICERS | , | | |
| President: | Daniel A. Sch | nmidt | |
| Address: | 948 Golf Vu E | Orive | |
| | Fond du Lac | WI | 54935 |
| Vice President: | | | 2010 3.1.1 |
| | | | <u> </u> |
| | | | (1) 00 Finns |
| Secretary: | | | |
| | | | <u>9</u> 9 |
| | | | S. S. |
| | | | |
| NOTE: If necessa | ary, you may attach an addendum to the application | listing additional officers a | nd/or directors. |
| The officer or direct are true and that he | Signature of Director or Offictor signing this document (and who is listed in number or she is aware that false information submitted in a provided for in s.817.155, F.S. | ber 12 above) affirms that | |
| 14 | Daniel A. Schmidt | Preside | ent and CEO |

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

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

THE COMBINATION DOOR CO.

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 April 8, 1912.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on November 19, 2010.

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

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.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 84678-B9CF2E40