

F11000000578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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W11000005570



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THU
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 FEB -8 PM 3:28

for 2/10/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Carlson Craft, 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," or "Certificate of Good Standing" 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:

Sara Nelson

Name of Person

Carlson Craft, Inc.

Firm/Company

1725 Roe Crest Drive

Address

North Mankato, MN 56003

City/State and Zip code

snelson@taylorcorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sara Nelson

at (507) 386-3296

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2011

SARA NELSON
1725 ROE CREST DRIVE
NORTH MANKATO, MN 56003

SUBJECT: CARLSON CRAFT, INC.
Ref. Number: W11000005570

*2/3/2011
Added date
of incorporation
Sara Nelson*

We have received your document for CARLSON CRAFT, 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):

The entity's date of incorporation/organization must be listed in the document.

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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 611A00002474

RECEIVED FEB - 8 2011

2011 FEB - 8 PM 3:23
DIVISION OF CORPORATIONS

**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. Carlson Craft, 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. Minnesota 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/15/2005 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. 1725 Roe Crest Drive, North Mankato, MN 56003
(Principal office address)

1725 Roe Crest Drive, North Mankato, MN 56003
(Current mailing address)

8. Sales Representative
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System

By: _____

(Registered agent's signature)

Jeanne Nelson
Assistant Secretary

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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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS

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

A. DIRECTORS

Chairman: Glen A. Taylor

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

Vice Chairman: _____

Address: _____

Director: Larry D. Taylor

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

Director: Larry D. Lorenzen

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

B. OFFICERS

President: Ron Hoffmeyer

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

Vice President: Suzanne M. Spellacy

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

Secretary: Gregory W. Jackson

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

Treasurer: Thomas A. Johnson

Address: 1725 Roe Crest Drive, North Mankato, MN 56003

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

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Gregory W. Jackson, Secretary

(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Carlson Craft, Inc.

Date Formed: 12/15/2005

Chapter Governed By: 302A

This certificate has been issued on 01/13/11.

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DIVISION OF CORPORATIONS



Mark Ritchie
Secretary of State.