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Florida Department of State
Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION
Viasystems Corporation

Certificate of Status	0
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Viasystems Corporation
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:

Sarah Kovenock

Name of Person

Viasystems Group, Inc.

Firm/Company

101 South Hanley Road, Suite 1800

Address

St. Louis, MO 63105

City/State and Zip code

sarah.kovenock@viasystems.com

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

For further information concerning this matter, please call:

Eric Wolz at (303) 655.9656

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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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDAIN 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. Viasystems Corporation(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Oregon

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

3. 93-1135197

(FEI number, if applicable)

4. 03/22/1994

(Date of incorporation)

5. Perpetual

(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. _____

1521 Poplar Lane, Forest Grove, OR 97116

(Principal office address)

101 South Hanley Road, Suite 1800, St. Louis, MO 63105

(Current mailing address)

8. Manufacturing/Sales

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

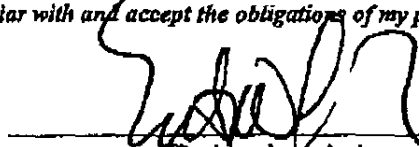
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Incorp Services, Inc.Office Address: 17888 67th Court NorthLoxahatchee

(City)

, Florida 33470

(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) Eric Wolz, 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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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached "Exhibit A"

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached "Exhibit A"

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

Daniel J. Weber, Vice President

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

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"Exhibit A"

**Officers and Directors
of
Viasystems Corporation**

Officers:

David M. Sindelar - President and Chief Executive Officer
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Gerald G. Sax - Vice President, Treasurer and Chief Financial Officer
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Daniel J. Weber - Vice President and Secretary
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Christopher R. Isaak - Vice President and Assistant Secretary
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Kelly E. Wetzler - Vice President and Assistant Secretary
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Directors:

David M. Sindelar
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

Gerald G. Sax
101 South Hanley Road, Suite 1800, St. Louis, MO 63105

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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:

VIASYSTEMS CORPORATION

was

incorporated

under the Oregon

Business Corporation Act

on

March 22, 1994

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



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

Debra L. Virag

November 3, 2011