

F 12000004655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

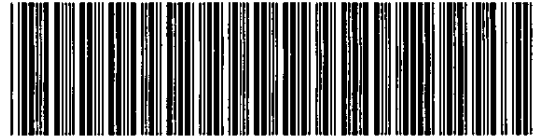
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/16/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Wipaire, 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:

Fred Vagts

Name of Person

Wipaire, Inc.

Firm/Company

1700 Henry Avenue

Address

South Saint Paul, MN 55075

City/State and Zip code

fvagts@wipaire.com

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

For further information concerning this matter, please call:

Fred Vagts

Name of Person

at (**651**) **286-6606**

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

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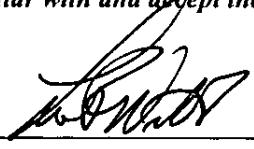
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Enclosed is a check for the following amount:

- ☐ \$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. Wipaire, 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. 41-1240896
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/14/1974 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. 1700 Henry Avenue, South Saint Paul, MN 55075
(Principal office address)
1700 Henry Avenue, South Saint Paul, MN 55075
(Current mailing address)
8. Aircraft Service Center (Repair and Maintenance of Aircraft)
(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: Lee Webb
- Office Address: 2370 Oak Bend Drive, Unit 1413
Palm Harbor, Florida 34683
(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.

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

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A. DIRECTORS

Chairman: Robert D. Wiplinger

Address: 9100 River Road
Inver Grove Heights, MN 55076

Vice Chairman: _____

Address: _____

Director: Gene DePalma

Address: 14 North Oaks Road
North Oaks, MN 55127

Director: Warren Mack

Address: 2539 Thomas Avenue South
Minneapolis, MN 55405

B. OFFICERS

President: Charles Wiplinger

Address: 8388 River Road
Inver Grove Heights, MN 55076

Vice President: Nancy Pone

Address: 8336 River Road
Inver Grove Heights, MN 55076

Secretary: Roxanne Bolinske

Address: 6450 Coryell Court, Inver Grove Heights, MN 55076

Treasurer: Nancy Pone

Address: 8336 River Road, Inver Grove Heights, MN 55076

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. Robert D. Wiplinger

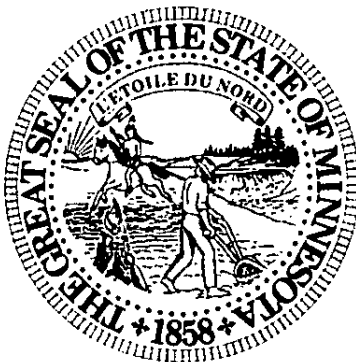
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Wipaire, Inc.
Date Filed: 06/14/1974
File Number: 2L-633
Minnesota Statutes, Chapter: 302A
Home Jurisdiction: Minnesota

This certificate has been issued on: 11/14/2012



Mark Ritchie
Mark Ritchie
Secretary of State
State of Minnesota

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