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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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REPARTMENT OF STATE

FILED
DEC 19 PM 12: 21



ACCOUNT NO. : I2000000195

REFERENCE : 464966 4390521

AUTHORIZATION :

COST LIMIT : \$ 70

ORDER DATE: December 18, 2012

ORDER TIME : 9:55 AM

ORDER NO. : 464966-010

CUSTOMER NO: 4390521

#### FOREIGN FILINGS

NAME: TCI ENGINEER-RASQUE, LTD.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT# 2926

EXAMINER:

## **COVER LETTER**

	Filing Section			
	TCI Engineer - Rasque, Li	td.	,•	
SODJECI.			- must include suffix	
Dear Sir or Ma	adam:			
"Certificate of	"Application by Foreign Corpf Existence," or "Certificate of ced foreign corporation to tran	Good Star	iding" and check are subn	
Please return a	all correspondence concerning	this matter	r to the following:	
Ronald J. Ras	sque			
		Name of	Person	
TCI Engineer	r - Rasque, Ltd.			
		Firm/Con	npany	
1718 State Ro	oad 16			
· · · · · · · · · · · · · · · · · · ·		Addr	ess	
LaCrosse WI	54601			
	(	City/State a	nd Zip code	
rrasque@tcia				
	E-mail address: (	to be used	for future annual report no	otification)
For further infe	ormation concerning this matt	ter, please o	call:	
Ronald J. Ras	sque	608	781-5700 x281	
Name	e of Person		Code & Daytime Telepho	ne Number
New F Division Clifton 2661 F Tallah	CET/COURIER ADDRESS: Gling Section on of Corporations in Building Executive Center Circle hassee, FL 32301		MAILING AL New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FL	ction rporations
Enclosed is a c	check for the following amoun			
<b>\$70</b> .00 Fi	iling Fee \$78.75 Filing F Certificate of S	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. TCI Engineer		A WOOLD AND IN WOODD A MONTH	
"Inc.," "Co.," "C	corporation; must include "INCORPORATEL Corp," "Inc," "Co," or "Corp.")	o, "Company," "Corporation,"	
		•	
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting busi	ness in Florida)
2. Wisconsin	3	46-1555238	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable	<u>)</u>
4. 11/28/12	5	Perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist	or "perpetual")
6			
		in Florida, if prior to registration)	
1010 C D		1502, F.S., to determine penalty liability)	
7. 1/18 State Ro	ad 16 LaCrosse WI 54601 (Principal office ad	deace	··
1710 State De	ad 16 LaCrosse WI 54601	urcss)	
1/16 State RO	(Current mailing ad	drèss)	
	(Current maning au	accssy	•
8. Practice of En	gineering		· .
(Purpose(s	s) of corporation authorized in home state or c	country to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
			- 11 - 11 - 11
Name:	Corporation Service Company	·	ILE 19 ary of ssee,
Office Address:	1201 Hays Street	<del></del>	FSIAII FERRIA
	Tallahassee	, Florida 32301	15 ES
	(City)	(Zip code)	21 DA
10 Pagistared of	gent's acceptance:		
	gent's acceptance. sed as registered agent and to accept serv	ice of process for the above stated corpo	oration at the place
designated in this	application, I hereby accept the appoint	ment as registered agent and agree to a	ct in this capacity. I
juriner agree to co and I am familiar	omply with the provisions of all statutes . with and accept the obligations of my po	relative to the proper and complete perfosition as registered agent.	ormance of my dutie
	Corporation Service Company		
	, , ,	NN N Ha	arry B. Davis
	Зу: .	Asst.	Vice President
	(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: Ronald J. Rasque	
Address: 1718 State Road 16	· · · · · · · · · · · · · · · · · · ·
LaCrosse WI 54601	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	<u> </u>
Address:	
B. OFFICERS	
President: Ronald J. Rasque	
Address: 1718 State Road 16	
LaCrosse WI 54601	IZ SEC ALL
Vice President: Ronald J. Rasque	
Address: 1718 State Road 16	9 19 E
LaCrosse WI 54601	FS 28 C
Secretary: Ronald J. Rasque	708(C 31.7 21.5
Address: 1718 State Road 16 LaCrosse WI 54601	<u> </u>
Treasurer: Ronald J. Rasque	
Address: 1718 State Road 16 LaCrosse WI 54601	·
NOTE: If necessary, you may attach an addendum to the application listing additional offi	icers and/or directors.
13. Kondolf Kartie	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirm are true and that he or she is aware that false information submitted in a document to the Dethird degree felony as provided for in s.817.155, F.S.	is that the facts stated herein epartment of State constitutes
14. Ronald J. Rasque, President	

## 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, PAUL M. HOLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

## TCI ENGINEER-RASQUE, LTD.

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 November 27, 2012.

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



IN TESTIMONY WHEREOF Have hereunto set my hand and affixed the official seal of the Department on December 19, 2012.

PAUL M. HOLZEM, Administrator Division of Corporate and Consumer Services 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/cos/verify/

Enter this code: 114972-319E824A