Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000216985 3)))



H130002169853ABC2

Note: DO NO!	Doing so will generate another cover sheet.	om uns page.
		ALAE S
To:	Division of Corporations Fax Number : {850}617-6381	FILE TAKES
From:	Account Name : C T CORPORATION SYSTEM	OF SE
	Account Number: FCAG00000023	

: (850)222-1092

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Phone

Fax Number

Email	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION

Dockside Canvas Company

AÈCEIVEL SEP 30 PH 2: 48 CRETANE OF STATE

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

MRD 10/1/13

COVER LETTER

·
TO: New Filing Section Division of Corporations
SUBJECT: Dockside Canvas Company
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 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:
Gene P. Bowen
Namo of Person
Bodman PLC
Firm/Company
201 W. Big Beaver Road, Suite 500
Address
Troy, MI 48084
City/State and Zip code
gbowen@bodmanlaw.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gene P. Bowen at (248) 743-6000
Name of Person Area Codo & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section
New Filing Section New Filing Section Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
14118/1855C, FD 32301
Enclosed is a check for the following amount:
\$70,00 Filing Fee ## \$78,75 Filing Fee & Cortificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

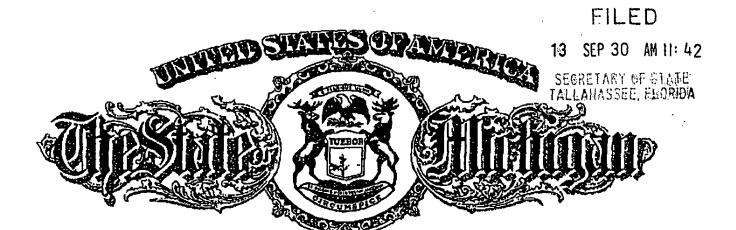
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

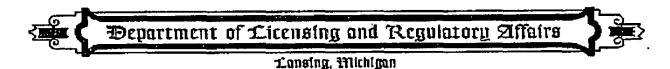
	Canvas Company	·			
(Enter name of co" "Co" "Co"	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
		.,			
	ble in Floride, enter alternate corporate na		adopted for the purpose of transacting business in Flo	rida)	
2. Michigan	20 L	_3.	38-2711969		
(State or country under the law of which it is incorporated)			(FBI number, if applicable)		
4. 12/29/86		5.	Perpetual		
•	of incorporation) ent to registration		(Duration: Year corp. will cease to exist or "perpete	181.)	
6. Subsequi		esá fi	n Florida, if prior to registration)		
•	(SEE SECTIONS 607.1501 & 60	07.1	502, F.S., to determine penalty liability)		
7. 29939 Soi	uth River Road				
	(Principal office	व्रतित	ress)		
Harrison I	ownship, MI 48045				
• •	(Current mailing	bba ;	ress)		
Any activity wi	thin the purposes for which comoral	llon	s authorized under Florida law can or may ope	rate.	
8		`	ountry to be carried out in state of Florida)		
9 Namo and stree	t address of Florida registered agent;	Æί	O. Box NOT accomple :	ရှိ ယ	
	CT Corporation Syste	•	o. Jun 1997	BTESS	
Name:				量业厂	
Office Address:	1200 South Pine Island	Ro	oad y		
:	Plantation		Florida 33324	30 MIII 42	
! -	(City)		(Zip code)		
10. Registered ag	rent's acceptance:			学でも	
Having been nam	ed as registered agent and to accept a	tery.	ice of process for the above stated corporation t	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.					
: :	Lurce	2~	Bax A.		
	(Registered agent	('# 5	gnuturo)		

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: SEGRETARY OF STAKE TALLAHASSEE, FEURIDA Address: Vice Chairman: Address: Director John P., Bowen Address: B. OFFICERS President: Address: 29939 South River Road Harrison Township, MI 48045 Directors Address: B. OFFICERS President: Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: John P. Bowen Address: Secretary: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bowen Address: Signature of Director of Officer The officer or director signing this document for the application issuing additional officers and/or directors. The officer or director signing this document (and who is listed in number 12 above) effirms that the facts stated herein are true and that he of price is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a. 817.155, F.S. 14. Jphn P. Bowen, President		LILED		
Chairman: SEGRETARY OF STATE TALLARIASSEE, FEURIDA Address: Vice Chairman: Address Director John P. Bowen 29939 South River Road Harrison Township, MI 48045 Director Address: B. OFFICERS President: Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: 29939 South River Road, Harrison Township, MI 48045 Tressurp: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 NOTE: If necessary, you may alach an addension by the application Issuing additional officers and/or directors. Signature of Director of Officer The officer or director digning this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of site is aware that false information submitted in a document to the Department of State constitutes at hirddegage foliony as provided for in a 817,155, F.S.	12. Names and business addresses of officers and/or directors:	13' SEP 30 AM 11- 4-2		
Vice California: Address Director John P. Bowen 29939 South River Road Harrison Township, MI 48045 Director Address B. OFFICERS Presidegi: John P. Bowen Address 29939 South River Road Harrison Township, MI 48045 Vice President: Address Secretary John P. Bowen Address 29939 South River Road Harrison Township, MI 48045 Vice President: Address 29939 South River Road, Harrison Township, MI 48045 Notes 29939 South River Road, Harr	A. DIRECTORS			
Vice Chaltres: Vice Chaltres: Director John P. Bowen 29939 South River Road Harrison Township, MI 48045 Director Address: B. OFFICERS President: John P. Bowen Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Sacretary: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Vice President: Address: 29939 South River Road, Harrison Township, MI 48045 NOTED If necessary, you may alach an addension by the application issting 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 signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or signing this document is information submitted in a document to the Department of State constitutes	Chairman:	SEGRETARY OF STATE		
Vice Chairman: Address Director 29939 South River Road Harrison Township, MI 48045 Director Address B. OFFICERS President: Address 29939 South River Road Harrison Township, MI 48045 Vice President: Address Sacretary: John P. Bowen Address Sacretary: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Donald River Road Address Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Address Address 29939 South River Road, Harrison Township, MI 48045 Tressure: Address Add	Address:	The state of the s		
Address Director Address 29939 South River Road Harrison Township, MI 48045 Director Address B. OFFICERS President: John P. Bowen Address 29939 South River Road Harrison Township, MI 48045 Vice President: Address Scientify: John P. Bowen Address Scientify: John P. Bowen Address 29939 South River Road, Harrison Township, MI 48045 Treasurp: Address 29939 South River Road, Harrison Township, MI 48045 Treasurp: Address 29939 South River Road, Harrison Township, MI 48045 Treasurp: Address 29939 South River Road, Harrison Township, MI 48045 Treasurp: Address 29939 South River Road, Harrison Township, MI 48045 Treasurp: Signature of Director or Officer The officer or director signing this document to the application fisting additional officers and/or directors. 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 opsite 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.				
Director Address 29939 South River Road Harrison Township, MI 48045 Director Address B. OFFICERS President: John P. Bowen Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address Socretary: John P. Bowen Address Socretary: John P. Bowen Address 13. Socretary: John P. Bewen 29939 South River Road, Harrison Township, MI 48045 NOTEs If necessary, you may altach in addendunt to the application insting additional officers and/or directors. 13. Signature of Director of 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 of the 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, P.S.	Vice Chairman:			
Director: Address Harrison Township, MI 48045 Director: Address B. OFFICERS President: John P. Bowen Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Secretary: John P. Bowen Address: John P. Bowen Address: John P. Bowen Address: Secretary: John P. Bowen Address: Secretary: John P. Bowen Address: NOTE: If necessary, you may altach an addengum by the application insting additional officers and/or directors. 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 of 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.	Address			
Address B. OFFICERS President: B. OFFICERS President: John P. Bowen Address: John P. Bowen Address: John P. Bowen Address: John P. Bowen John P. Bowen John P. Bowen Address: John P. Bowen John P. Bowen Address: Socretary: John P. Bowen John P. Bowen Address: Socretary: John P. Bowen Signature of Director or Officer The officer or director rigating this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of the 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.				
Harrison Township, MI 48045 Directors Address B. OFTICERS President: John P. Bowen 29939 South River Road Harrison Township, MI 48045 Vice President: Address Secretary: John P. Bowen Address: John P. Bowen Address: John P. Bewen Address: John P. Bewen Treasurb: John P. Bewen Secretary: John P. Bewen Secretary: John P. Bewen Treasurb: John P. Bewen Signature of Director or Officer The officer or director righting this document (and who is tiled in number 12 above) affirms that the facts stated herein are true and that he of the 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.	John P. Bowen			
Address B. OFFICERS President: John P. Bowen 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Socretain: John P. Bowen Address: John P. Bowen Address: John P. Bowen Address: Separate of Director of Officer The officer or director rigging this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of this 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, P.S.	Address 29939 South River Road			
B. OFFICERS President: John P. Bowen Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Socretaty: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 Treasurer: Address: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 NOTE: If nocessary, you may alach an addendum to the application disting additional officers and/or directors. 13. Signature of Director or Officer The officer or director digning this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of the 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.	Harrison Township, MI 48045			
B. OFFICERS President: Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Sacretary: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 Treasure: John P. Bowen Address: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 NOTE: If necessary, you may allach an addendum to the application histing 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 abovo) affirms that the facts stated herein are true and that he of the is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in .817.155, P.S.	Directors			
B. OFFICERS President: Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: Sacretary: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 Treasure: John P. Bowen Address: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 NOTE: If necessary, you may allach an addendum to the application histing 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 abovo) affirms that the facts stated herein are true and that he of the is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in .817.155, P.S.				
President: Address: John P. Bowen Harrison Township, MI 48045 Vice President: Address: John P. Bowen Secretary: John P. Bowen Address: 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 of site 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.				
President: Address: John P. Bowen Harrison Township, MI 48045 Vice President: Address: John P. Bowen Secretary: John P. Bowen Address: 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 of site 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.	B. OFFICERS			
Address: 29939 South River Road Harrison Township, MI 48045 Vice President: Address: John P. Bowen 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bewen 29939 South River Road, Harrison Township, MI 48045 NOTE: If necessary, you may alach an addendum to the application histing 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 of site is awere that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.				
Harrison Township, MI 48045 Vice President: Address: Socretary: John P. Bowen Address: John P. Bowen Treasurer: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bowen Address: 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 grate 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.				
Vice President: Address: Socretary: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurpr: 29939 South River Road, Flarrison Township, MI 48045 NOTE: If necessary, you may attach an addendum to the application fisting additional officers and/or directors. 13. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he office 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, P.S.	Harrison Township, MI 48045			
Secretary: John P. Bowen Address: 29939 South River Road, Harrison Township, MI 48045 Treasurer: John P. Bewen Address: 29939 South River Road, Rarrison Township, MI 48045 NOTE: If necessary, you may alach as addendum to the application listing additional officers and/or directors. 13. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he of the 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.				
Secretary: John P. Bowen Address: John P. Bewen John P. Bewen 29939 South River Road, Harrison Township, MI 48045 NOTE: If necessary, you may attach an addendum to the application histing additional officers and/or directors. 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 of site 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.				
Address: 29939 South River Road, Harrison Township, MI 48045 Treasurpr. 29939 South River Road, Rarrison Township, MI 48045 NOTE: If necessary, you may attach an addendum to the application fisting additional officers and/or directors. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he of side 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.	Address			
Address: 29939 South River Road, Harrison Township, MI 48045 Treasurpr. 29939 South River Road, Rarrison Township, MI 48045 NOTE: If necessary, you may attach an addendum to the application fisting additional officers and/or directors. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he of side 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.	John P. Bowen			
Treasurpt: Address: Address: Dohn P. Bewen 29939 South River Road, Parrison Township, MI 48045 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he opphe 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.	29939 South River Road, Harrison Townshi	p. MI 48045		
NOTE: if necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he oppose 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.				
NOTE: If necessary, you may attach an addendum to the application fisting additional officers and/or directors. Signature of Director or Officer The officer or director righting this document (and who is tisted in number 12 above) affirms that the facts stated herein are true and that he of site 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, P.S.	20020 South Dight Boad Portion Township MI 48045			
Signature of Director or Officer The officer or director righting this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he qualte 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, P.S.				
Signature of Director or Officer The officer or director righting this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of site 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, P.S.	Ald (1 Monn)			
The officer or director righting this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of site 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, P.S.		-		
John D. Rayson, Dropislant	The officer or director figuring this document (and who is listed in number 12 are true and that he of site is aware that false information submitted in a docu			

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





This is to Certify That

DOCKSIDE CANVAS COMPANY

was validly incorporated on December 29, 1986, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full feith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1164385

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 26th day of September, 2013.

Alan J. Schefke, Director Corporations, Securities & Commercial Licensing Bureau