

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.

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To: Division of Cor Fax Number	porations : (850)617-6383		JUL 13	71

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (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.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

Flowmaster, Inc.

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7/13/2016 12:32:46 PM From: To: 8506176383(2/5)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Flowmaster, Inc.	
	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good sabove referenced foreign corporation to transact but	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Richard J. Whitlow, Jr.	
Name	of Person
Flowmaster, Inc.	
Firm/C	Company
11529 Investor Ave.	≥ SEC
A	ddress E T
Baton Rouge, LA 70809	
City/Sta	te and Zip code
rich@flowmaster-br.com	
E-mail address: (to be us	ed for future annual report notification):
For further information concerning this matter, plea	se call:
Rich Whitlow at (225	753-7315
Name of Person at (225 Area C	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: \$\Boxed{\text{\$\text{5}}}\$ \$70.00 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy ☐ Certificate of Status & Certified Copy

7/13/2016 12:32:46 PM From: To: 8506176383(3/5)

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.

State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) February 4, 1983 Perpetual	(11 name unavana	ble in Florida, enter alternate corporate name	adopted for the purpose of transac	eting business in Florida)
(State or country under the law of which it is incorporated) February 4, 1983 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 11529 Investor Ave. Baton Rouge, LA 70809 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pinc Island Road Plantation, FL 33324 Florida			72-0959797	-
(Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Florida	(State or country	under the law of which it is incorporated)	(FEI number, if	applicable)
(Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pinc Island Road Plantation, FL 33324 Plorida	Falsania 4 1005		Perpetual	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 11529 Investor Ave. Baton Rouge, LA 70809 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pinc Island Road Plantation, FL 33324 Florida	(Date	of incorporation)	(Date of duration, if ot	ner than perpetual)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pinc Island Road Plantation, FL 33324 Florida	N/A			
(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Florida				bility)
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Florida	11529 Investor A			
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Florida		(Princ	pal office address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Florida				
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Name: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Plantation, FL 33324 Plantation System CT Corporation System A Signature System A	Name and stree	t address of Florida registered agent. (P.	O Boy NOT accentable)	
Mame: 1200 South Pine Island Road Plantation, FL 33324 Plantation, FL 33324 Plantation, FL 33324			O. Box <u>(NOT</u> acceptable)	
Tice Address: 1200 South Pine Island Road	Name:			
, Florida	fice Address:	1200 South Pine Island Road		
(City) (Zip code)		Plantation, FL 33324	. Florida	2.H 38
		(City)	(Zip code)	
Registered agent's acceptance:			(Zíp code)	

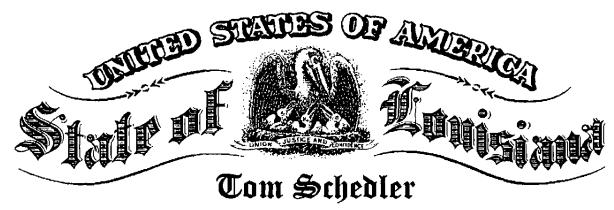
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

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A. DIRECTORS	
Chairman: None	
Address:	
Vice Chairman: None	
Address:	
Director: None	
Address:	
Director: None	
Address:	
B. OFFICERS	
President: Richard J. Whitlow, Jr.	TAKE a
Address: 11529 Investor Ave.	
Baton Rouge, LA 70809	2051
Vice President: Richard Whitlow, Sr.	
Address: L1529 Investor Ave,	S. D. CO
Baton Rouge, LA 70809	30 5A
Secretary: Patricia Whitlow	
Address: 11529 Investor Avc., Baton Rouge, LA 70809	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing a	dditional officers and/or directors.
12. Richard J. Whitlow, Jr. Signature of Director or Officer	

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



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

FLOWMASTER, INC.

A corporation domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on February 04, 1983,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

July 12, 2016

Certificate ID: 10728957#UAR93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

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