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PICK-UP	☐ WAIT	MAIL				
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Special Instructions to	Filing Officer:					
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Office Use Only



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SECRETARY OF STATIONS
OIVISION 28 PH 2: 22

N. CAUSSEAUX

F17-2994

COVER LETTER

TO:	Registration Section Division of Corporatio	ns		
SUBJ	ECT: <u>Watkins an</u>	Name of corporati	Trucking, Inc. on - must include suffi	<u> </u>
Dear S	ir or Madam:			
"Certif		Certificate of Good S	tanding" and check are	nsact Business in Florida," submitted to register the
Please	return all correspondenc	e concerning this mat	ter to the following:	
Tax	Department			
	•	Name	of Person	
Sch	neider			<u></u>
		Firm/C	ompany	
PO 8	ox 2545			
	OA 20113	Ad	dress	
G.ca	an Roy IT Su	12010		
<u>Ole</u>	en Bay, WI Su	City/State	and Zip code	
tract	مرميم (الميمن مامر	-	•	
_14,3,1	eam@sChneiden E-m	ail address: (to be use	d for future annual repo	ort notification)
	ther information concern			
Deh	Stott	at (920) 592 <i>-3</i> 834) }
	Name of Person	Area C		lephone Number
	STREET/COURIER	ADDRESS:	MAILING	G ADDRESS:
Registration Section		Registration Section		
	Division of Corporations Clifton Building Division of Corporations P.O. Box 6327			
	2661 Executive Center Tallahassee, FL 32301	Circle		e, FL 32314
Enclos	ed is a check for the follo	owing amount:		
⊠ \$70		8.75 Filing Fee & ertificate of Status	\$78.75 Filing Fee a Certified Copy	& \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 15, 2017

TAX DEPARTMENT ATTN: SCHNEIDER P.O. BOX 2545 GREEN BAY, WI 54306

SUBJECT: WATKINS AND SHEPARD TRUCKING, INC.

Ref. Number: W17000050113

We have received your document for WATKINS AND SHEPARD TRUCKING, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 517A00012126

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.

"Inc.," "Co.," "Corp	poration; must include "INCORPORATED," " b," "Inc," "Co," or "Corp.")	COMPANY, CONFORMATION,		
75				
(If name unavailabl	e in Florida, enter alternate corporate name add	_	iness in Florida)	
Montana 3.		81-044 101069		
(State or country u	nder the law of which it is incorporated)	(FEI number, if applicab	ole)	
June 24, 19	<u>87 </u>	(Date of duration, if other than p		
(Date of	incorporation)	(Date of duration, if other than p	perpetual)	
June 1, 201	U			
,	(Date first transacted business in F			
_	(SEE SECTIONS 607.1501 & 607.1502	• • •		
3101 Packer	and Dr. Green Bay, W.T. (Principal	54313		
	_			
POBOY 254	5 Green Boy, WI 543010:	2545		
	(Current mailing a	address, if different)	일 .	
			O	
.,		_	300	
Name and street a	ddress of Florida registered agent: (P.O. I	Box NOT acceptable)	ISION J	
Name and street a	ddress of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	ECRE OF THE STATE	
Name:	C T Corporation System	Box NOT acceptable)	SECRE OF COR 2011 JUN 28	
Name:		Box <u>NOT</u> acceptable)	ISION OF CORPOR	
Name:	C T Corporation System	-	ISION OF CORPORAL BIT JUN 28 PM 2:	
Name:	C T Corporation System 1200 South Pine Island Road	Box NOT acceptable) , Florida	ISION OF CORPOREITE	
	C T Corporation System 1200 South Pine Island Road Plantation (City)	-	ISION OF CORPORE.	

By: C T Corporation System

| Assistant Secretary (Registered agent's signature)

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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director: Paul J. Kardish
Address: 3101 Adderland Dr.
Green Bay, WI 54313
Director:
Address:
Z CZE
B. OFFICERS
President: Pohert S. Elkins
Address: 3101 Packerland Dr.
Green Bay, WI S4313
Vice President:
Address:
Secretary: Michael F. Gasick
Address: 3101 Backerland Dr. Green Bay, WI 54313
Treasurer: Michael F. Gasick
Address: 3101 Packerland Dr. Green Bay, WI 54313
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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.
13. Paul J. Kardish Director (Typed or printed name and capacity of person signing application)



CERTIFICATE OF EXISTENCE

I, **COREY STAPLETON**, Secretary of State for the State of Montana, do hereby certify that:

WATKINS AND SHEPARD TRUCKING, INC.

duly filed its Articles Of Incorporation for the domestic entity in this office on **June 24, 1987,** and on that date was authorized to transact business in this state for a term of Perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on record in this office by said corporation and the records indicate the corporation is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 30th day of May, 2017.

COREY STAPLETON

Montana Secretary of State

Certificate Number: 053020170037