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(Requestor's Name)						
(10410013) 5 (10116)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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## **COVER LETTER**

то:	Registration Section Division of Corporations					
CHDI	Alpine To	oling & Technology, Inc.				
SOBO	ECT:	Name of corpora	ion - mu	st include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence	ion by Foreign Corporation e," or "Certificate of Good S n corporation to transact bus	Standing'	and check are sul		
	return all corresp E. (Dee Dee) Fuller	ondence concerning this ma	itter to th	e following:		
	n. (Dee Dec) runer		<u>.</u>			
Fuller	Law and Counselin		of Perso	n		
	<u> </u>	Firm/C	ompany		<del></del>	
751-C	Kenmoor Avenue S		ompung			
		Ac	idress			
Grand	Rapids, Michigan	19546				
-	<u> </u>	City/Sta	e and Zip	code	· · · · · · · · · · · · · · · · · · ·	
fullerd	@fullerlaw.biz					
		E-mail address: (to be us	ed for fut	ure annual report	notification)	
For fu	rther information	concerning this matter, plea	se call:			
Tania l	E. (Dee Dee) Fuller	616 at (	45	4-0022		
11	Name of Person		Code	Daytime Telep	hone 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		
Enclos	ed is a check for	the following amount:				
<b>\$</b> 70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & iffied 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. Alpine Tooling & Technology, Inc. l. (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) Wisconsin (State or country under the law of which it is incorporated) 2. (FEI number, if applicable) September 1, 1994 (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) 9779 South Franklin Drive #102, Franklin, Wisconsin 53132 (Principal office address) 2728 Tiburon Blvd East #306, Naples, Florida 34109 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Tania E. (Dee Dee) Fuller Name:

#### 9. Registered agent's acceptance:

Naples

Office Address:

8814 Spinner Cove Lane

(City)

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.

Cania E. (Audu) Fully
(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 Mark Sjolund Chairman: 2728 Tiburon Blvd East #306 Address: Naples, Florida 34109 Vice Chairman: Director: Address: \_\_  $\overline{\mathbf{o}}$ **B. OFFICERS** Mark Sjolund President: 2728 Tiburon Blvd East #306 Address: \_ Naples, Florida 34109 Vice President: Mark Sjolund Secretary: 2728 Tiburon Blvd East #306, Naples, Florida 34109 Address: Mark Sjolund Treasurer: 2728 Tiburon Blvd East #306, Naples, Florida 34109 NOTE: If necessary, you may attach an addendy in to the application lighting additional officers and/or directors. 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.

Mark Sjolund

13.

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, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### ALPINE TOOLING & TECHNOLOGY, INC.

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 September 01, 1994.

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



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 09, 2018.

MARY ANN MCCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 224462-16C7AC9C