(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Ott)/State/2.ph. Hello #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
9
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2019 JUL 30 AM 9: 1, 6 2019 JUL 30 PH 4: 22

RECEIVED

B KINSEY JUL 3 1 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	: 12000000195						
REFERENCE	3 : 864955 7972762						
AUTHORIZATION	: Spelle le man						
COST LIMIT	/ / \						
ORDER DATE : July 30, 2019							
ORDER TIME : 3:10 PM							
ORDER NO. : 864955-005							
CUSTOMER NO: 7972762							
FOREIGN FILINGS							
NAME: PROCAM CONTRO	OLS, INC.						
XXXX QUALIFICATION (TYPE: C	<u>co</u>)						
PLEASE RETURN THE FOLLOWING AS	S PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY							
CERTIFICATE OF GOOD ST	TANDING						

EXAMINER:

CONTACT PERSON: Amanda Robinson -- EXT# 62968

COVER LETTER

TO: Registration Se Division of Co					
	Controls, Inc.				
JUMICI.	Name	of corporation	- must include suffix		
Dear Sir or Madam:					
	ce," or "Certificate	e of Good Stan	Authorization to Transa ding" and check are sub ss in Florida.		
Please return all corres Kathryn Turnacliff	pondence concern	ing this matter	to the following:		
		Name of F	Person		
Pentair					
5500 Wayzata Blvd., Sui	te 900	Firm/Comp	pany		
		Addre	SS		
Golden Valley, MN 554	16				
kathryn.turnacliff@penta	ir.com	City/State an	d Zip code		ir 610 2
	E-mail address	: (to be used fo	or future annual report i	notification) .	ြ ယ ()
For further information	concerning this m	natter, please ca	all:		30 AH
Kathryn Turnacliff		763 at (656.5327	; [2] 1 	٠٠. نة
Name of Perso	n	Area Code	Daytime Telepl	hone Number	9.1
STREET/COL Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle	S:	MAILING A Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
Enclosed is a check for	the following amo	ount:			
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Certificate o	f Status &

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.

(Enter name of c	corporation; must include "INCORPORATED." Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	N,"	
(If name unavail	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacti	ng business in Florida)	
Texas	3.	75-220516		
(State or count) 11/23/1987	y under the law of which it is incorporated)	(FEI number, if a	pplicable)	
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
2605 TECHNOI	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 OGY DR STE 300 PLANO, TX 75074 USA	Florida, if prior to registration) 2. F.S., to determine penalty liabil	lity)	
		l office address)		
	(типстра.	i office address)		
				
	(Current mailing	address, if different)		
	(Current mailing	address, if different)		
Name and stree	(Current mailing et address of Florida registered agent: (P.O.			
	et address of Florida registered agent: (P.O. Corporation Service Company		20	
Name:	et address of Florida registered agent: (P.O.		7019 JUI	
Name:	ct address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street Tallahassee	Box <u>NOT</u> acceptable) 32301	2019 JUL 30	
Name:	ct address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street	Box <u>NOT</u> acceptable) 32301		
Name: ffice Address:	ct address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street Tailahassee (City)	Box <u>NOT</u> acceptable) 32301 Florida		
Name: ffice Address: Registered age aving been nam signated in this rther agree to co	ct address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes rel	Box NOT acceptable) 32301 Cip code) cof process for the above state and agricultive to the proper and complete to the proper a	ed corporation af the pluce ree to act in this capacity. ete performance of my	
Name: ffice Address: Registered age aving been names in this riper to continue the string and I am for the string and I am f	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of a miliar with and accept the obligations of a miliar with a miliar	Box NOT acceptable) 32301 Cip code) cof process for the above state and agricultive to the proper and complete to the proper a	ed corporation af the pluce ree to act in this capacity. ete performance of my	

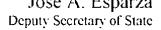
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ____ Vice Chairman: Address: Karla Robertson Director: 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: Mark Borin Director: 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: **B. OFFICERS** Karl Frykman President: 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: ___ Treasurer - Mark Borin Vice-President: 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: _ Katie Verschelden Secretary: _ 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: Mark Borin Treasurer: 5500 Wayzata Blvd., Suite 900 Golden Valley, MN 55416 Address: 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 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.

Katie Verschelden, Secretary





Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for PROCAM CONTROLS, INC. (file number 104793900), a Domestic For-Profit Corporation, was filed in this office on November 23, 1987.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 30, 2019.



Jose A. Esparza Deputy Secretary of State