F20000000 3178

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: 7/13 Pecerved name Change (alternate) WC				
W2-64333				

Office Use Only



400346085014

06/19/20--01023--005 **78.75



COVER LETTER

TO:		tration Section on of Corporations						
SUBJ	ECT:	TRANSPORT REFRIGERA	TION INC.					
	.,	Name o	of corporatio	n - must	include suffix			
Dear S	ir or M	adam:						
"Certif	icate of	"Application by Foreign Co Existence," or "Certificate ced foreign corporation to tr	of Good Sta	nding" a	and check are subm			ı, ^{**}
Please	return a	all correspondence concerni	ng this matte	r to the	following:			
KERLI	AHNKI	E						
			Name of	Person				
TRAN	SPORT	REFRIGERATION, INC.						
			Firm/Co	npany				
PO BO	X 6023							
			Addi	ress				
DE PE	RE, WI	54115						
			City/State	and Zip	code			
KJAHN	NKE@T	RCOMPANIES.COM						
		E-mail address	: (to be used	for futu	re annual report no	tification)		
For fur	ther inf	ormation concerning this m	atter, please	call:				
KERLJ	AHNKI	E	920 at (338	-4406			
	Name	e of Person	Area Coo	ie –	Daytime Telepho	one Number	. 0	
	Regist Divisi The C	CET/COURIER ADDRESS tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 tassee, FL 32303			MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	porations	JUL 13 MIT: 44	HED.
	nake ch	check for the following amo eck payable to: FLORIDA DE ng Fee \$78.75 Filing Certificate o	PARTMENT g Fee & [□ \$ 78. 7	ATE 5 Filing Fee & fied Copy	□ \$87.50 F Certific	ate of S	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.

TRANSPORT 1.	REFRIGERATION, INC.				
(Enter name of "Inc.," "Co" "C	corporation; must include "INCORPORATED," Corp." "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	N."		
(If name unavai	lable in Florida, enter alternate corporate name as	Tob - FL	nu business in Elecido)		
2. WISCONSIN		39-1034368	ing outsiness in Proceedy		
(State or count 10/30/1987	ry under the law of which it is incorporated)	PERPETUAL			
(Date	c of incorporation)	(Date of duration, if other	than perpetual)		
7. ³⁹⁶⁴ S. PACKEI	(Date first transacted business in 1 (SEE SECTIONS 607.1501 & 607.150 RLAND DRIVE, DE PERE, WI 54115	Florida, if prior to registration) 2, F.S., to determine penalty liabil	ity)		
	(Principal office	street address)			
PO BOX 6023, I	DE PERE, WI 54115		<u> </u>		
3. Name and stree	et address of Florida registered agent: (P.O.	address, if different) Box NOT acceptable)			
Name:	BUSINESS FILINGS INCORPORATED	<u> </u>			
Office Address:	1200 SOUTH PINE ISLAND ROAD	_	11: 45		
	PLANTATION	Florida 33324	45		
	(City)	(Zip code)			

9. Registered agent's acceptance:

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.

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.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□Chairman	Name: DOUGLAS MYERS	□Chairman	Name: MICHAEL MIRRO				
□Vice Chairman	Address: PO BOX 6023	□Vice Chairman	Address: PO BOX 6023				
□Director	DE PERE, WI 54115	□Director	DE PERE, WI 54115				
President	920-338-4444	□President	920-338-4444				
□Vice President		■Vice President					
□Secretary	□Treasurer	☐ Secretary	□Treasurer				
□Other	Other	□Other	□ Other				
□Chairman	Name: WILLIAM DAWSON	□Chairman	Name:				
□Vice Chairman	Address: PO BOX 6023	□Vice Chairman	Address:				
□Director	DE PERE, WI 54115	□Director					
□President	920-338-4444	□President					
■ Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer				
□Other	Other	□Other					
□Chairman □Vice Chairman	Name:Address:	□Chairman	Name: 20 Address: 13				
□Director		□Director	₩				
□President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□Secretary	□Treasurer				
□Other		□Other	Other				
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.

DOM 180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I. Patti Epstein, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

TRANSPORT REFRIGERATION, INC.

is a domestic corporation or limited liability company organized under the laws of this state and that its date of incorporation or organization is August 3, 1964.

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 June 2, 2020.

PATTI EPSTEIN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Patti Gostein

Defon Wilson BY: Delou Wilson



June 24, 2020

KERI JAHNKE TRANSPORT REFRIGERATION, INC. PO BOX 6023 DE PERE, WI 54115 US

SUBJECT: TRANSPORT REFRIGERATION, INC.

Ref. Number: W20000064333

We have received your document for TRANSPORT REFRIGERATION, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

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

Laura D Chang Regulatory Specialist II

Letter Number: 320A00012476

7/13 Received name Change