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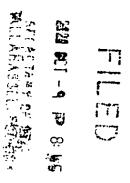
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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OCT 13 2020

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: C & A SCALE SERVICE, INC.	
Name of corporation -	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business	ng" and check are submitted to register the
Please return all correspondence concerning this matter to TERESA HILDRETH	the following:
Name of Per	rson
C&A SCALE SERVICE, INC.	
Firm/Compa	ny
P.O. BOX 270	
Address	
CRESCENT, IOWA 51526	
City/State and	Zip code
OFFICE@CANDASCALES.COM	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call	:
TERESA HILDRETH at (712	545-3461
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	F STATE 78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy 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.

	rp," "Inc." "Co," or "Corp.")			
(If name unavaila	ble in Florida, enter alternate corporate name ad	lopted for the purpose of transact	ing business in Florida)	
IOWA	3. 42-1242961			
(State or country	under the law of which it is incorporated)	(FEI number, if	applicable)	
01/25/1985				
. (Date	of incorporation)	(Date of duration, if other	r than perpetual)	
	•			
i	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		ility)	
, 25300 OLD LINC	OLN HIGHWAY HONEY CREEK, IOW	/A 51542		
P.O. BÓX 270	(Principal office CRESCENT, IOWA 51526	e street address) address, if different)		
3. Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)		
Name:	CORPORATION SERVICE COMPANY			
	CORPORATION SERVICE COMPANY 1201 HAYS STREET		THE STATE OF THE S	
	1201 HAYS STREET	, Florida		
Office Address: . Registered age	1201 HAYS STREET TALLAHASSEE (City) nt's acceptance:	(Zip code)		
Office Address: Registered age Yaving been nam lesignated in this further agree to co	1201 HAYS STREET TALLAHASSEE (City) nt's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of all statutes reliwith and accept the obligations of my positions.	, Florida (Zip code) e of process for the above statent as registered agent and aguative to the proper and completion as registered agent.	ed corporation at the placeree to act in this capacity	
Office Address: Registered age Yaving been nam lesignated in this further agree to co	1201 HAYS STREET TALLAHASSEE (City) nt's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of all statutes religious of all statutes religious.	, Florida (Zip code) e of process for the above statent as registered agent and aguative to the proper and completion as registered agent.	ed corporation at the placeree to act in this capacity	

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

under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Charles Hildreth Chairman: 411 Powells Addition Address: Crescent, IA 51526 Keith Clausen Vice Chairman: 19318 Badger Avenue Address: Crescent, IA 51526 Director: _ **B. OFFICERS** Keith Clausen President: 19318 Badger Avenue Address: Crescent, IA 51526 Vice President: Address: Charles Hildreth Secretary: 411 Powells Addtion Crescent, IA 51526 Address: Charles Hildreth Treasurer: 411 Powells Addition Crescent, IA 51526 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. Keith

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

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Issue Date: 9/26/2020

Name: C & A SCALE SERVICE, INC. (490 DP - 99912)

Date of Incorporation: 1/25/1985

Duration: PERPETUAL

- l, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. Articles of dissolution have not been filed.

Certificate ID: CS203785

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State