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COVER LETTER

	stration Section tion of Corporations			
	Gehl Companies, Inc.			
501611X)1.	Name	of corporation - m	ust include suffix	
Dear Sir or M	fadam:			
"Certificate o	"Application by Foreign C of Existence," or "Certificate leed foreign corporation to	e of Good Standing	g" and check are subm	
Please return	all correspondence concerr	ing this matter to t	he following:	
Shelly Troy				
		Name of Pers	son	
Comdata Inc.				
		Firm/Compan	y'	
5301 Maryland	d Way			
		Address		
Brentwood, Ti	N 37027			
		City/State and Z	Lip code	(
athena.lancasti	er@ileetcor.com			1
1	E-mail addres	s: (to be used for f	uture annual report no	tification)
For further in	formation concerning this r	natter, please call:		्र ज्ञ
Shelly Troy		615	370-7626	ن
Nam	e of Person	Area Code	370-7626 Daytime Telepho	one Number
Regis Divis The C 2415	EET/COURIER ADDRES stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 81 hassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	rtion porations
	check for the following am neck payable to: FLORIDA D ing Fee	EPARTMENT OF 1g Fee & S7	STATE 8.75 Filing Fee & ertified 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.

1.	Gehl Companie	s. Inc.		
		orporation; must include "INCORPORATED, orp." "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
	(If name unavail	able in Florida, enter alternate corporate name	•	ess in Florida)
2.	Minnesota	3.	83-2903463	
	(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable	:)
4.	12/20/2018	5.		
	(Date of incorporation)		(Date of duration, if other than per	petual)
6.	1/1/2020			
7	3600 American F		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
۲۰_		(Principal off	ice street address)	~ `
	109 Northpark B	lvd., Suite 500, Covington, LA 70433		•
		(Current mailir	ng address, if different)	
8.	Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	<u> </u>
	Name:	Corporation Service Company		معم
Οí	fice Address:	1201 Hays Street		
		Tallahassee	. Florida ³²³⁰¹	
		(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.

Corpora	tion Service Company	
Ву:	Ainy Wellinger, MA. Asst VP.	
	(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.

A. DIRECTORS				
□Chairman	Name:	□Chairman	Name:	s Freund
□Vice Chairman	Address: State 32nd St. N. Suite 300	□Vice Chairman	Address:) Peachtree Road, Suite 2400
■Director	Wichita, KS 67226	■Director	Atlanta, GA	30305
₽ President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	■ Secretary		□Treasurer
□Other	Other	□Other		□Other
☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary ☐Other	Steve Pisciotta 109 Northpark Blvd., Suite 500 Address: Covington, LA 70433	☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary ☐Other	Address:	□Treasurer
				7.9
□Chairman	Name:	□ Chairman		<u> </u>
□Vice Chairman	Address:	□Vice Chairman	Address:	1
□Director		□Director		
□Director □President		□Director □President		
				
□President		□President		☐ Treasurer
□President □Vice President	☐ Treasurer	□President		
☐ President ☐ Vice President ☐ Secretary ☐ Other ☐ Important Notice: Usindividuals may be	☐Treasurer ☐Other Jse an attachment to report more than six (6). The attachment to the index when filing your Florida Department	□President □Vice President □Secretary □Other chment will be imagedent of State Annual Re	d for reporting poport form.	☐Treasurer ☐Otherurposes only. Non-indexed
□ President □ Vice President □ Secretary □ Other	☐Treasurer ☐Other Jse an attachment to report more than six (6). The attachment	□President □Vice President □Secretary □Other chment will be imagedent of State Annual Re	d for reporting poport form.	☐Treasurer ☐Otherurposes only. Non-indexed
□ President □ Vice President □ Secretary □ Other □ Important Notice: Undividuals may be 12. □ The officer or direct she is aware that fars.817.155, F.S.	☐ Treasurer ☐ Other	□ President □ Vice President □ Secretary □ Other chment will be imagedent of State Annual Reservoir Officer r 11 above) aftirms th	d for reporting poport form. at the facts state	☐ Treasurer ☐ Other urposes only. Non-indexed
□ President □ Vice President □ Secretary □ Other □ Important Notice: Undividuals may be 12. □ The officer or direct she is aware that fars.817.155, F.S.	☐ Treasurer ☐ Other Jse an attachment to report more than six (6). The attachment added to the index when filing your Florion Department Signature of Director of the signing this document (and who is listed in number	□ President □ Vice President □ Secretary □ Other chment will be imagerent of State Annual Reservoir Officer r 11 above) aftirms the ment of State constitu	d for reporting perport form. at the facts stated tes a third degree	☐ Treasurer ☐ Other urposes only. Non-indexed

... in ...

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Gehl Companies, Inc.

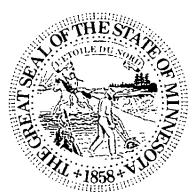
Date Filed: 12/20/2018

File Number: 1055977500023

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 12/09/2020



Ateve Pinn Steve Simon

Secretary of State State of Minnesota (1) (1) (1) (1) (1) (1)