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T. LEMIEUX DEC 29 2021

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Dynamic Sealing Technolog	gies, Inc.		
Name	of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Standi	ng" and check are such	t Business in Florida," nitted to register the
Please return all correspondence concert	ning this matter to	the following:	
Dan Brecht			
	Name of Pe	erson	
Dynamic Sealing Technologies, Inc.			
	Firm/Comp	any	
13829 Jay Street NW			
	Addres	S	
Andover, MN 55304		_	
	City/State and	l Zip code	
accounting@dsti.com			
E-mail addre	ss: (to be used fo	r future annual report n	otilication)
For further information concerning this	matter, please ca	II:	
Julie Beyer	763	Daytime Telephone Number	
Name of Person	Area Code	Daytime Teleph	none Number
STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations o
Enclosed is a check for the following ar Please make check payable to: FLORIDA \$70.00 Filing Fee \$78.75 Fil Certificate	DEPARTMENT (OF STATE \$78.75 Filing Fee & Certified Copy	(1) \$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.

	g Technologics, Inc.				
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATIO	N,"		
(If name unavails	ible in Florida, enter alternate corporate name	adopted for the purpose of transaction	ng business in Florida)		
2. (State or countr	y under the law of which it is incorporated)	3, 41-1978305 (FEI number, if applicable)			
(Date	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501) NW, Andover, MN 55304	502, F.S., to determine penalty liabil	lity)		
13829 Jay Street	NW, Andover, MN 55304				
<u></u>		ng address, if different)	21		
8. Name and stree Name: Office Address:	Capitol Corporate Service 515 East Park Avenue 2nd Tallahassee (City)	s, Inc.	DEC 20 FM 2: 17		

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.

Yvette Cleveland, Assistant Secretary on behalf of Capitol Corporate Services, Inc. (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	Name:	Chairman	John Knol	<u> </u>
Chairman	14351 Vermillion St NE		Address: 12000 Stoneridge Road Dayton, MN 55327	
□Vice Chairman	Address:Ham Lake, MN 55304	□ Vice Chairman		
□ Director	Train Blace, 1777 3330	□Director		
国 President		□ President		
□Vice President		■ Vice President		
□ Secretary	□Treasurer	☐ Secretary	(∃Treasurer
Other	□ Other	Other		Other
□Chairman	Scott Ilstrup	□Chairman	Name:	
	20673 Elk Lake Rd	□Vice Chairman	Address:	
	Flk River, MN 55330	□ Director		
Director		□President		
□President		□ Vice President		
□Vice President				□ Treasurer
⊠ Secretary	□Treasurer	□ Secretary		Other
Other	Other	Other		CJOniei
	Name:	□Chairman	Name:	
□ Chairman				
□Vice Chairman	Address:	Director		
□Director				
□President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	☐ Secretary		Treasurer
Other		Other		[]Other
individuals may b	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department.	in of Buile Minutal K	eport rorm.	poses only. Non-indexed
12.	1 O			
she is aware that	ector signing this document (and who is listed in number false information submitted in a document to the Depart Output Define Testion (Typed or printed name and capacity of personal capacity)	ment of State constit	incs a min degree	, , p
	(Typed or printed name and capacity of person	on arkining abbricario	•••	

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: DYNAMIC SEALING TECHNOLOGIES,

INC.

Date Filed: 07/05/2000

File Number: 11F-891

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 12/14/2021

Oteve Pinnon Steve Simon

Secretary of State State of Minnesota