## F23000004002

(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:				
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## **COVER LETTER**

TO: Registration Section Division of Corporatio	ns			
SUBJECT: Inspec, Inc.				
	Name of corporation	- must include suffix	<del></del>	
Dear Sir or Madam:				
The enclosed "Application by l "Certificate of Existence," or " above referenced foreign corpo	Certificate of Good Stan	ding" and check are subm		
Please return all correspondenc	e concerning this matter	to the following:		
Jessica Zimmerman				
	Name of I	Person		
Inspec, Inc.				
	Firm/Com	pany		
5801 Duluth Street				
	Addre	ss		
Minneapolis, MN 55422				
	City/State ar	nd Zip code		
jzimmerman@inspec.com				
E-m	ail address: (to be used f	or future annual report no	tification)	
For further information concern	ning this matter, please ca	all:		
at ( 763 ) 546-3434				
Name of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sec Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
<del>-</del>	ORIDA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified 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 60° 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	åble in Florida, enter altern		oted for the purpose of transacting bu	siness in Florida)
Minnesota State or country	y under the law of which it	3. 4 is incorporated)	10997830 (FEI number, if applica	ıble)
. 03/22/1974 (Date	of meorporation)	5.	(Dote of duration, if other than	perpetual)
			orida, if prior to registration) F.S., to determine penalty liability)	
5801 Dulut	h Street Minneapolis, M	MN 55422 (Principal office <u>s</u>	treet address)	
		(Current mailing ac	ldress, if different)	
No.		· -		
	<u>n a</u> ddress of Florida regis Corporation Service Cor	stered agent: (P.O. B		
Name:		stered agent: (P.O. B		
Name:	Corporation Service Cor	stered agent: (P.O. B	ox <u>NOT</u> acceptable)	202: EB:
Name:	Corporation Service Cor 1201 Hays Street	stered agent: (P.O. B		2023 HA SEGGE TALL
Name: Office Address.  Registered ago Iaving been nam lesignated in this further agree to co and I am familiar	Corporation Service Corporation Service Corporation Service Corporation (City and a receptance) are application, I hereby accomply with the provision with and accept the obli	stered agent: (P.O. Bompany  Indito accept service of the appointment of all statutes relating ations of my positions.)	ox <u>NOT</u> acceptable)  , Florida 32301 (Zip code)  of process for the above stated core as registered agent and agree to the proper and complete per on as registered agent.	act in this copac
Name: Office Address.  Registered ago Inving been nam lesignated in this irther agree to co nd I am familiar	Corporation Service Corporation Service Corporation Service Corporation Service Corporation (City ent's acceptance: ed as registered agent an application, I hereby accomply with the provision	stered agent: (P.O. Bompany  Indito accept service of the appointment of all statutes relating ations of my positions.)	ox <u>NOT</u> acceptable)  , Florida 32301 (Zip code)  of process for the above stated core as registered agent and agree to the proper and complete per on as registered agent.	act th this copac

the Department of State, by the Secretary of State of other official having custody of corporate records in the jurisdiction under the law of which it is incorporated

<sup>11.</sup> For indial indexing purpose insidences of the end addresses of the primary officers and/or directors (no to six (o) total)

Chairman Name: Dwight Benoy	□Chairman	Suma. Richard Phillips				
		Name: Richard Phillips				
□Vice Chairman Address: 66 West Golden Lake Road	_ □Vice Chairman	Address: 1351 Lake Dr. West, Apt. 317				
■Director Circle Pines, MN 55014	Director	Chanhassen, MN 55317				
□President	_ □ President					
□Vice President	_ □Vice President					
□ Secretary □ Treasurer	□ Secretary	□Treasurer				
Other Other	_ □Other	Other				
□Chaiπnan Name: Michael Remington	Chairman	Name: Gary Patrick				
□Vice Chairman Address: 5322 Mayview Road	_ □Vice Chairman	Address: 13433 Hidden Valley Road				
■Director Minnetonka, MN 55345	Director	Cross Lake, MN 56442				
■ President	_ President					
□Vice President	_ □Vice President					
☐ Secretary ■ Treasurer	■ Secretary	□Treasurer				
□Other □Other	□Other	□Other				
□Chairman Name: Peter Nottleson	Chairman	Name: David Campbell				
□Vice Chairman Address: 3050 Ruby Avenue	_ □Vice Chairman	Address: 3667 Canary Way				
■Director Racine, WI 53402	Director	Eagan, MN 55123				
□President	_ □ President					
■ Vice President	■ Vice President	20000				
□Secretary □Treasurer	□Secretary	□Treasurer				
□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 Elorida 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.  Michael Reminoton						

## 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: Inspec, Inc.

Date Filed: 03/22/1974

File Number: 2K-536

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 05/09/2023

Ateve Pinn Steve Simon

Secretary of State State of Minnesota