# TRANSMITAL ETTER

TO:

Qualification/Tax Lien Section Division of Corporations

200002717882--9 -12/21/98--01110--002 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT:	Aqua Aire of Florida, Inc.
•	(Name of corporation - must include suffix)
Dear Sir or N	Madam:
	"Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate and check are submitted to register the above referenced foreign corporation to transact business
Please return	all correspondence concerning this matter to the following: W98-28541
	Attorney Jack W. Lemke
	(Name of Person)
	Herrling, Clark, Hartzheim & Siddall, Ltd.
	(Firm/Company)
	800 North Lynndale Drive
	(Address)
	Appleton, WI 54914
	(City/State/Zip)
Should you	(City/State/Zip)  (City/State/
Di	xie A. Thoyre at 920-739-7366
(Name	of Person) (Area Code & Daytime Telephone Number)

### **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

## **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 22, 1998

ATTORNEY JACK W. LEMKE HERRLING, CLARK, HARTZHEIM & SIDDALL, LT 800 NORTH LYNNDALE DR. APPLETON, WI 54914

SUBJECT: AQUA AIRE OF FLORIDA, INC.

Ref. Number: W98000028541

We have received your document for AQUA AIRE OF FLORIDA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Letter Number: 198A00059960

Jennifer Sindt Document Examiner SECRETARY OF STATE
DIVISION OF CORPORATIONS

# 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.	Aqua Aire of Florida, Inc.  (Name of corpora tion: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a						
	natural person or partnership if not so contained in the nar	ne at present)	is a corporation instead of	a	0		
2.	Wisconsin3	. 39-19446	01	99	NIS SE		
	(State or country under the law of which it is incorporated)	(FEI nui	mber, if applicable)	- JAN	$\Xi$		
4.	November 4, 1998 5.	. perpetua	al	1			
	(Date of Incorporation)	(Duration: Year corp	. will cease to exist or	- P# -	LED Y OF ST		
6.	Upon Qualification			규 알	ATIC		
	(Date first transacted business in Florida. (SEE SECTION	NS 607.1501, 607.1	502, AND 817.155, F.S.)		)NC		
7.	N4688 Highway E	_					
	Kaukauna, WI 54130			<del></del>	$\bigvee$		
	(Current mailing		· · · · · · · · · · · · · · · · · · ·	<del></del>			
8.	To engage in any lawful activity withing organized under the Wisconsin Business (Purpose(s) of corporation authorized in home state or	Corporation 1	Law (Chap. 180 of	ations <u>the</u> Wis	may be . Stats.)		
9.	Name and street address of Florida registered agent acceptable)  Name: Marilyn Summe	nt: (P.O. Box or Mail	Drop Box NOT				
	Office Address: 29 Cove Lane		<del></del>		۔		
			- · · · · · · · · · · · · · · · · · · ·				
	Eustis	, Florida,	32726 (Zip Code)	٠.	* **		
10	. Registered agent's acceptance:		(Zip Code)				

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.

11. 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 incorporat ed.

A. DIRECTO	RS (Street address only - P.O. Box NOT acceptable)	
Chairman:	Thomas J. Murphy	
Address:	N4664 Olde Ireland Way	
	Freedom, WI 54131	
Vice Chairman:		
Address:		
Director:	Dean P. Murphy	
Address:	N4688 Highway E	JAN
	Kaukauna, WI 54130	1
Director:	Terry L. Semrow	7
Address:	5722 South 3600 West	34
· · · · · ·	Roy, UT 84067	
B. OFFICERS	(Street address only - P.O. Box NOT acceptable)	
President	Thomas J. Murphy	
Address:	N4664 Olde Ireland Way	
	Freedom, WI 54131	
Vice President:	Dean P. Murphy	
Address:	N4688 Highway E	
	Kaukauna, WI 54130	
Secretary:	Dean P. Murphy	
Address:	N4688 Highway E	
	Kaukauna, WI 54130	
Treasurer:	Thomas J. Murphy	
Address:	N4664 Olde Ireland Way	<del> </del>
	Freedom, WI 54131	
officers and/or	ary, you may attach an addendum to the application listing additional	
13	Lean 771/uspha	
(;	Signature of Chairman, Vice Chairman or any officer listed in number 12 of the application)	
14. De	ean P. Murphy, Secretary	

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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

DFI/CCS/Corp Fm 31-C (7/96) - Printed on Recycled Paper -

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RICHARD L. DEAN, Secretary, Department of Financial Institutions, do hereby certify that

AQUA AIRE OF FLORIDA, INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is NOVEMBER 3, 1998.

DIVISION OF CORPORATIONS

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I further certify that said corporation has not yet completed its initial report year and, accordingly, has not filed an annual report under sec. 180.1622, 180.1921, or 181.651 of the Wisconsin Statutes; and that said corporation has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on NOVEMBER 13, 1998.

of Wiscon

Richard/L. Dean, Secretary Department of Financial Institutions

BY: Patricia Weben

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.