

**F99000000000209**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**RECEIVED**  
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**REGISTERED AGENT CHANGE  
POLARIS SALES & SERVICE INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

*FOR*  
*2/22/10*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** POLARIS SALES INC. doing business as POLARIS SALES & SERVICE INC.  
Name of Corporation

**DOCUMENT NUMBER:** F99000000209

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca J. Sullwold

Name of Contact Person

Polaris Industries Inc.

Firm/Company

2100 Highway 55

Address

Medina, MN 55340-9770

City/State and Zip Code

becky.sullwold@polarisind.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen Healy

at ( 612 )

852-1285

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR26045 (8/05)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Minnesota in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: POLARIS SALES INC. doing business as POLARIS SALES & SERVICE INC.
2. The principal office address: 2100 HIGHWAY 55 MEDINA MN 55340
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/23/1998 Document number: P99000000209

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jeanne Nelson  
Signature of an officer or director

Jeanne Nelson Attorney-in-Fact

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: C/T Corporation System  
Michele Miller  
Signature of Registered Agent

2/12/2010

Date

**Michele Miller**  
**Assistant Secretary**

If signing on behalf of an entity:

POLARIS SALES INC. doing business as

Typed or Printed Name POLARIS SALES & SERVICE INC.

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (W05)

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