F99000001745

ATTORNEYS' TITLE	
Requestor's Name	
660 E. Jefferson St.	
Address	
Tallahassee, FL 32301 850-222-2785 3000	028262936
City/St/Zip Phone #	4/01/9901055012 ****78.75 *****78.75
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):	
1- WISCONSIN DISTRIBUTORS, INCORPORATED	
	W99-7853
2-	10 (-1-10
3-	···
4-	
X Walk-in Pick-up time ASAP Certified Copy	7A 99
	TALLAHASS
Mail-out Will wait Photocopy XXX Certificate of S	tatus AR - 2 AR
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NEW FILINGS AMENDMENTS	AM II: 33 SEE, FLORID
Profit Amendment Non-Profit Resignation of R.A., Officer/Director	55 7
Non-Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent	83 83
Domestication Dissolution/Withdrawal	>
Other Merger	
	. //
OTHER FILINGS REGISTRATION/QUALIFICATION	AL4/2/99
Annual Report XX Foreign	St. C. L.
Fictitious Name Limited Partnership Name Reservation Reinstatement	
Name Reservation Reinstatement Trademark	
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Other	99
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Examiner's Initials	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 1, 1999

ATTORNEYS' TITLE 660 E. JEFFERSON ST. TALLAHASSEE, FL 32301

SUBJECT: WISCONSIN DISTRIBUTORS, INC.

Ref. Number: W9900007853



We have received your document for WISCONSIN DISTRIBUTORS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 699A00016621

99 APR -2 M 9 02

TO:

Qualification/Tax Lien Section

Division of Corporations

TRANSMITTAL LETTER

SUBJECT: WISCONSIN D'ISTRIBUTORS INCO (Name of corporation - must include suffix)
(Name of corporation - must include surfix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
DARREIL HANSON (Name of Person) WISCONSIN D'ISTRIBUTORS, INESSET STATE (Firm/Company) 2921 Syene Rd. (Address) (Address) MADISON, WI 53713
Should you need to call someone concerning this matter, please call: DARREN HANSON at (608) 274-2337 (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

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: (Name of corporation: 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 name at present.) 11560NS1VI (State or country under the law of which it is incorporated) Quality cation (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))istributures (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) MATHEW HANSON Office Address: 2500 10. 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.

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 incorporated.

Address:

Treasurer: Address:

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) ARREIL Chairman: Address: Koberta Vice Chairman: Address: HANSON MATTHEW Director: Myers STOCK BRIDGE. FORT 8813 Address: Director: _ Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) ARREIL President: Address: _ ERTA Vice President: _ Address: _ Secretary: _

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors

13. (Signature of Chairman, Vise Chairman, or any officer listed in number 12 of the application)

DARREIL HANSON

Chairman/President

DOM 180 181 185

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

WISCONSIN DISTRIBUTORS, INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is July 1, 1983.

I further certify that corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on March 31, 1999.

RICHARD L. DEAN, Secretary Department of Financial Institutions

BY: Anne Ploess

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.