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### FOREIGN LIMITED LIABILITY COMPANY

Custom Body, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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Corporate Filing

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Custom Body, LLC (Name of Foreign Limited Liability Company) 3. 30-0141952 2. Missouri (Jurisdiction under the law of which foreign limited liability ( FEI number, if applicable) company is organized) 4, 12/27/2002 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3527 Gardner Road, Kansas City, MO 64120 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Fred Ross, 3527 Gardner Road, Kansas City, MO 64120 Jim Ross, 3527 Gardner Road, Kansas City, MO 64120 Chris Ross, 3527 Gardner Road, Kansas City, MO 64120 SEE ATTACHMENT 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Truck Crane Sales ignature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Jim Ross

#### Attachment to Florida

### Member / Manager Information

1.	Full Name:	Joe Ross	
4.	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	
	City:	Kansas City	
	State:	MO	
	ZIP Code:	64120	•
2.	Full Name:	Kari Snyder	
	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	
	City:	Kansas City	
	State:	MO	
	ZIP Code:	64120	
3.	Full Name:	Marie Ross	
**	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	
	City:	Kansas City	
	State:	MO	
	ZIP Code:	64120	
4.	Full Name:	Ruth Ross	
	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	
	City:	· · · · · · · · · · · · · · · · · ·	
	State:	Kansas City	
	ZIP Code;	MO	
	Zir Code.	64120	
5.	Full Name:	John Ross	
	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	
	City:	Kansas City	
	State:	МО	Fa P
	ZIP Code:	64120	OH HOV
6.	Full Name:	Nick Synder	čα>⊇ .
	Member/Manager:	Member	
	Business Address:	3527 Gardner Road	a <sup>2</sup>
	City:	Kansas City	- CC
	State:	MO	
	ZIP Code:	64120	DF 55
7.	Full Name:	Francis Ross	
	Member/Manager:	Member	_
	Business Address:	3527 Gardner Road	•
	City:	Kansas City	
	State:	MO	
	ZIP Code:	64120	
		V I X = V	

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF

I The Nor	ne of the Limited Liability Company is:	
Custom Body	• •	
2. The nar	ne and the Florida street address of the registered agent and office are:	
	CT Corporation System .	
	(Name)	
	1200 South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	<b>_</b>
	Plantation FT 33324	
	City/State/Zip	_
Having hee	n named as registered agent and to accept service of process for the above s	stated limited
liability con agent and a relating to t	npany at the place designated in this certificate, I hereby accept the appoints gree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with a of my position as registered agent as provided for in Chapter 608, Florida S	ment as registered fall statutes nd accept the Statutes.
liability con agent and a relating to t obligations	rpany at the place designated in this certificate, I hereby accept the appoint gree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with a coff my position as registered agent as provided for in Chapter 608, Florida States System	ment as registered  fall statutes  nd accept the  Statutes.  TALLAHASSEE, FL.  FL.  TALLAHASSEE, FL.
liability con agent and a relating to t obligations	npany at the place designated in this certificate, I hereby accept the appoint gree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with a composition as registered agent as provided for in Chapter 608, Florida Station System  **The System Special Assh Secritary**  [Signature]  \$ 100.00 Filing Fee for Application	ment as registered  fall statutes  nd accept the  Statutes.  TALLAHASSEE, FL.  FL.  TALLAHASSEE, FL.
liability con agent and a relating to t obligations	npany at the place designated in this certificate, I hereby accept the appoint gree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with a composition as registered agent as provided for in Chapter 608, Florida Stion System  **The British Special Assistance**  [Signature]	ment as registered  fall statutes  nd accept the  Statutes.  FALLAHASSE

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# STATE OF MISSOURI



Matt Blunt Secretary of State

# CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

CUSTOM BODY, LLC LC0075568

was created under the laws of this State on the 27th day of December, 2002, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 20th day of October, 2004

Secretary of State

Certification Number: 7111665-3 Reference:

Verify this continuate online at http://www.sos.mo.gov/businessentity/verification