

4/18/2019

Division of Corporations

**M190000004003**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FC4000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

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

Email Address: \_\_\_\_\_

Foreign Limited Liability Company  
ARBOC Specialty Vehicles, LLC

Certificate of Status	0
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 055.09(2), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ARBOC Specialty Vehicles, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC")

2. Delaware 45-3111159  
(Jurisdiction under the laws of which foreign limited liability company is organized) (FID number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)  
(See sections 605.09(1) & 605.09(5), F.S., to determine penalty liability)

5. 51165 Greenfield Pkwy 711 Kenningham Avenue  
(Street Address of Principal Office) (Mailing Address)  
Middlebury, IN 46540 Winnipeg, MB CANADA R2C 3T4

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CTCorporationSystem  
Office Address: 1200SouthPineIslandRoad  
Plantation, Florida 33324  
(City) (Zip code)

## Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

By: CTCorporationSystem  
Linda Stauffer  
(Registered agent's signature) Linda Stauffer, Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Brian Dewsnup

☐ Member Address: 7001 Universal Coach Drive

☐ Authorized Louisville, KY 40258

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: Chris Stoddart

☐ Member Address: 711 Kernaghan Ave.

☐ Authorized Winnipeg, Manitoba R2C 3T4

Person \_\_\_\_\_

☒ Other President ☐ Other \_\_\_\_\_

☐ Manager Name: Colin Pewarchuk

☐ Member Address: 711 Kernaghan Ave.

☐ Authorized Winnipeg, Manitoba R2C 3T4

Person \_\_\_\_\_

☒ Other Secretary ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☐ Manager Name: Paul Soubry

☐ Member Address: 711 Kernaghan Ave.

☐ Authorized Winnipeg, Manitoba R2C 3T4

Person \_\_\_\_\_

☒ Other CEO ☐ Other \_\_\_\_\_

☐ Manager Name: Glenn Asham

☐ Member Address: 711 Kernaghan Ave.

☐ Authorized Winnipeg, Manitoba R2C 3T4

Person \_\_\_\_\_

☒ Other CFO ☐ Other \_\_\_\_\_

☐ Manager Name: Janice Harper

☐ Member Address: 711 Kernaghan Ave.

☐ Authorized Winnipeg, Manitoba R2C 3T4

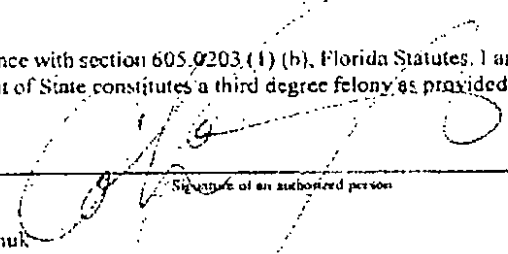
Person \_\_\_\_\_

☒ Other Vice President ☐ 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 Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

  
 \_\_\_\_\_  
 Signature of an authorized person  
 Colin Pewarchuk  
 \_\_\_\_\_  
 Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARBOC SPECIALTY VEHICLES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5028388 8300

SR# 20192980373

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202672962

Date: 04-18-19