

PI10000056300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

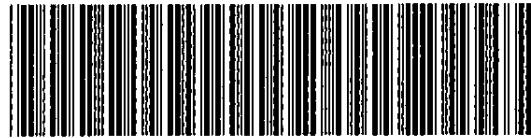
Special Instructions to Filing Officer:

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JUN 17 2011

EXAMINER



400208551324

06/16/11--01014--012 \*\*35.00

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11 JUN 16 AM 11:13

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 JUN 16 PM 1:38

CORADUMP



1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel  
850 878 5368 fax  
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June 16, 2011

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 16 PM 1:39

Re: Order #: 8172839 SO  
Customer Reference 1: 072263-0003  
Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Tom Joseph, Inc (FL)  
Conversion  
Florida

Tom Joseph, Inc (FL)  
Incorporation  
Florida

*Please file  
these  
simultaneously.  
Thank You!*

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

TOM JOSEPH, INC.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a CORPORATION

(Enter entity type. Example: limited liability company, limited partnership,  
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of WISCONSIN

(Enter state, or if a non-U.S. entity, the name of the country)

on DECEMBER 7, 1988 (f/k/a MAGNUM PRODUCTS, INC.)

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

TOM JOSEPH, INC.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_.

**(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)**

6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

FILED STATE  
SECRETARY OF CORPORATIONS  
11 JUN 16 PM 1:39

Signed this 10 day of JUNE, 20 11.

**Required Signature for Florida Profit Corporation:**

Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Thomas J. Joseph

Printed Name: THOMAS J. JOSEPH Title: DIRECTOR, PRESIDENT AND TREASURER

**Required Signature(s) on behalf of Other Business Entity:** Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: Thomas J. Joseph  
Printed Name: THOMAS J. JOSEPH Title: PRESIDENT AND TREASURER

Signature: Carol J. Joseph  
Printed Name: CAROL J. JOSEPH Title: VICE PRESIDENT AND SECRETARY

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

|   |                   |
|---|-------------------|
| Certificate of Conversion:                  | \$35.00           |
| Fees for Florida Articles of Incorporation: | \$70.00           |
| Certified Copy:                             | \$8.75 (Optional) |
| Certificate of Status:                      | \$8.75 (Optional) |

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DIVISION OF CORPORATIONS  
11 JUN 16 PM 1:39

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be: **TOM JOSEPH, INC.**

### ARTICLE II PRINCIPAL OFFICE

Principal street address  
**443 South Creek Drive**  
**Osprey, FL 34229**

Mailing address, if different is:

c/o Jill Towery, President  
Magnum Products, LLC  
215 Power Drive Berlin, WI 54923

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**The purposes shall be to engage in any lawful activities authorized by Chapter 607 (607.0301) of the Florida Statutes.**

### ARTICLE IV SHARES

The number of shares of stock is: **2,800**

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Thomas J. Joseph, Director, President and Treasurer**  
Address: **443 South Creek Drive**  
**Osprey, FL 34229**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: **Carol J. Joseph, Vice President and Secretary**  
Address: **443 South Creek Drive**  
**Osprey, FL 34229**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: **Timothy J. McCoy, Director**  
Address: **Godfrey & Kahn, S.C.**  
**333 Main Street, Suite 600**  
**Green Bay, WI 54301**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **CT Corporation System**  
Address: **1200 South Pine Island Road**  
**Plantation, FL 33324**

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

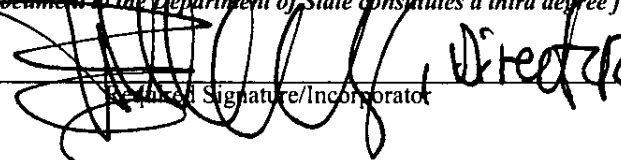
Name: **Timothy J. McCoy c/o Godfrey & Kahn, S.C.**  
Address: **333 Main Street, Suite 600**  
**Green Bay, WI 54301**

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

**6/15/2011**  
Date

*I submit this document and affirm that the facts stated herein are true. 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.*

  
Required Signature/Incorporator

**6/7/11**  
Date