## P16000051428

(Red	questor's Name)	
(Address)		
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(City	/State/Zip/Phone	e #)
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(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
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16 JUN 13 AM 8: 26

SECRETARY OF STATE
SECRETARY OF STATE



## **COVER LETTER**

TO:	Charter Section Division of Cor					
CURI	ECT: FORKLIFT	EXCHANGE, INC.				
SUDO	EC1	Name of	Resulting Florida	Profit	Corporation	
		e of Conversion, Articles Profit Corporation" in ac			ees are submitted to convert an "15, F.S.	Other Business
Please	e return all corresp	oondence concerning this	s matter to:			
Dan K	Kossow					
		Contact Person		-		
Hoist	Liftruck Mfg., Inc.					
		Firm/Company		-		
6499	W. 65th Street					
		Address		_		
Bedfo	ord Park, IL 60638					
		City, State and Zip Code	e	_		
dan@	hoistlift.com					
	E-mail address: (t	o be used for future anni	ual report notifica	tion)		
For fu	ırther information	concerning this matter,	please call:			
Dan k	Kossow		_at (	552-2	712	
	Name of Co	ontact Person	Area C	ode and	l Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
<b>=</b> \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filin and Certified C		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New Division Clifton	EET ADDRESS: Filings Section ion of Corporation on Building Executive Center			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 31, 2016

DAN KOSSOW HOIST LIFTRUCK MFG., INC. 6499 W. 65TH STREET BEDFORD PARK, IL 60638

SUBJECT: FORKLIFT EXCHANGE, INC.

Ref. Number: W16000039710

We have received your document for FORKLIFT EXCHANGE, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 716A00011403

**Certificate of Conversion** 

For

"Other Business Entity"

Into

Florida Profit Corporation

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SECRETARY OF STATE TALLAHASSEE FLORIDA

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
FORKLIFT EXCHANGE, 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
(Enter state, or if a non-U.S. entity, the name of the country)
October 4th, 1985 on .
Enter date "Other Business Entity" was first organized, formed or incorporated
organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
FORKLIFT EXCHANGE, 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 Floric Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporatio if an effective date is listed therein.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

Signed thisday of April	, 20 16	
Required Signature for Florida Profit Corporation		
Signature of Chairman, Vice Chairman, Director, Of Incorporator:  Printed Name: MARTIN FLASKA  Title: PRE		ot been selected, an
Required Signature(s) on behalf of Other Busines	s Entity: [See below for required signa	ture(s).]
Signature: 2		
Printed Name: MARTIN FLASLA	Title: Prevolet	
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
Signature:		TALL SE
Printed Name:	Title:	CARE V
Signature:		ASSET
Printed Name:	Title:	
Signature:		27 RID#
Printed Name:	Title:	
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	e.	
All others: Signature of an authorized person.		
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

FILED

The name of the corporation shall be:	
The hame of the corporation shan bo.	
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STA TALLAHASSEE FLOR
The principal place of business/mailing address is:	The state of the s
Principal street address	Mailing address, if different is:
6499 W. 65TH STREET	6499 W. 65TH STREET
BEDFORD PARK, IL 60638	BEDFORD PARK, IL 60638
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS IN ACCORDANC	E WITH THE LAWS OF THE STATE OF FLORIDA.
The number of shares of stock is:	
The number of shares of stock is:	
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI  Martin Flaska, President & Secretary	IRECTORS  Name and Title: Michael Flaska, Vice President
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI  Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place	Michael Flaska, Vice President
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI  Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place	Name and Title: Michael Flaska, Vice President  520 S. Washington, Unit 402
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI  Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place  Naples, Florida 34105	Name and Title:  Michael Flaska, Vice President  520 S. Washington, Unit 402  Napierville, IL 60540
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place  Naples, Florida 34105  Name and Title:	Name and Title:  Michael Flaska, Vice President  520 S. Washington, Unit 402  Napierville, IL 60540  Name and Title:
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place Naples, Florida 34105  Name and Title:  Address:  Address:	Name and Title:  Michael Flaska, Vice President  520 S. Washington, Unit 402  Napierville, IL 60540  Name and Title:  Address:
ARTICLE V INITIAL OFFICERS AND/OR DI  Name and Title:  Martin Flaska, President & Secretary  3266 Sedge Place  Naples, Florida 34105  Name and Title:	Name and Title:  Michael Flaska, Vice President  520 S. Washington, Unit 402  Napierville, IL 60540  Name and Title:  Address:

	E VI REGISTERED AGENT	
The <u>name</u>	and Florida street address (P.O. Box NOT a	acceptable) of the registered agent is: FILED
Name:	JAMES F. CAUDILL, ESQ.	16 JUN 13 AM 8: 27
Address:	9045 STADA STELL CT., SUITE 400	
riddi Coo.	NAPLES, FL 34109	SECRETARY OF STATE FALLAHASSEE FLORIDA
<u>ARTICL</u>	E VII INCORPORATOR	
The <u>name</u>	and address of the Incorporator is:	
Name:	MARTIN FLASKA	
Address:	6499 W. 65TH STREET	
	BEDFORD PARK, IL 60499	
		**************************************
inis ceriyi	cuie, I am jumuiar wan una accepi ine appoir	ument as registerea agent and agree to act in this capacity
0	Required Signature/Registered Agent	Date
		herein are true. I am aware that any false information submitted in a degree felony as provided for in s.817.155, F.S.
	711	4/28/16
	Required Signature/Incorporator	Date