# F0500000 3920

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	(dress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	isiness Entity Nar	me)
(Do	ocument Number)	}
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
JW.	Office Use On	nly



600056863026

07/08/05--01003--011 \*\*96.25

O5 JUL -8 AMOS JUL -8 AM IO: 38
TALLAHASSEEN FUL SHALL TANTIONS

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: National Salvage & Service Corporation
(Name of corporation - must include suffix)
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:
Catherine Ruf
(Name of Person)
National Salvage & Service Corporation
(Firm/Company)
PO Box 300
(Address)
Clear Creek, IN 47426-0300
(City/State and Zip code)
For further information concerning this matter, please call:
Catherine Ruf at (812 ) 339-9000
Catherine Ruf at (812 ) 339-9000 To
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ Certificate of Status Certified Copy Certified Copy

### 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.

(Enter name of corporation; must include "INCORPORATI	The state of the s	
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED, COMPANI, CORCORATION,	
(If name unavailable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)	
Indiana	3. <b>35-1741803</b>	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
January 1988	5. Perpetual	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
(Date first transacted busine	ss in Florida, if prior to registration)	
/CDE CECTIONIC (07 1601 & 40)		
(SEE SECTIONS 607.1301 & 60	7.1502, F.S., to determine penalty liability)	
417 S. Walnut St., Bloomington, IN 47		
·	7401	
417 S. Walnut St., Bloomington, IN 47 (Principal office	7401	
417 S. Walnut St., Bloomington, IN 47	7401 address)	
417 S. Walnut St., Bloomington, IN 47  (Principal office of the PO Box 300, Clear Creek, IN 47426	7401 address)	
417 S. Walnut St., Bloomington, IN 47  (Principal office of the PO Box 300, Clear Creek, IN 47426	7401 address)	
PO Box 300, Clear Creek, IN 47426  (Current mailing	address)  AGE OF LEAST OF LEAS	
PO Box 300, Clear Creek, IN 47426  (Current mailing Courses)  (Purpose(s) of corporation authorized in home state of the course	address)  address)  accountry to be carried out in state of Florida)	
PO Box 300, Clear Creek, IN 47426  (Current mailing)  All Lawful Business  (Purpose(s) of corporation authorized in home state of the property	address)  address)  accountry to be carried out in state of Florida)	
PO Box 300, Clear Creek, IN 47426  (Current mailing Courses)  (Purpose(s) of corporation authorized in home state of the course	address)  address)  accountry to be carried out in state of Florida)	
PO Box 300, Clear Creek, IN 47426  (Current mailing)  All Lawful Business  (Purpose(s) of corporation authorized in home state of the property	address)  address)  accountry to be carried out in state of Florida)	
PO Box 300, Clear Creek, IN 47426  (Current mailing)  All Lawful Business  (Purpose(s) of corporation authorized in home state of Name and street address of Florida registered agent: (Name: Kelvin Simmerman)  Relice Address: 1812 Cherrywood Lane	address)  address)  address)  ar country to be carried out in state of Florida)  P.O. Box NOT acceptable)	
PO Box 300, Clear Creek, IN 47426  (Current mailing)  All Lawful Business  (Purpose(s) of corporation authorized in home state of Name and street address of Florida registered agent: (Name: Kelvin Simmerman)	address)  address)  accountry to be carried out in state of Florida)	

#### 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.

(Registered agent's signature)

- 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.
- 12. Names and business addresses of officers and/or directors:

A. DIREC	CTORS	
Chairman:	Curtis C. Schopp	_
Address:	417 S. Walnut St., Bloomington, IN 47401	_
		_
Vice Chairm	nan: Victoria Schopp	_
Address: 43	17 S. Walnut St., Bloomington, IN 47401	
		_
Director:		_
Address: _		<u>.</u>
	out the same of th	
Director: _		_
Address: _		_
_		_
B. OFFIC	CERS	
President: _	Curtis C. Schopp	_
Address:	417 S. Walnut St., Bloomington, IN 47401	
_		, 
Vice Preside	ent: Victoria Schopp	
Address:	417 S. Walnut St., Bloomington, IN 47401	<i>]</i>
_	Ref. 78	_
Secretary:	Catherine Ruf	_
Address:	417 S. Walnut St., Bloomington, IN 47401	_
Treasurer: 9	Catherine Ruf	_
Address:	417 S. Walnut St., Bloomington, IN 47401	_
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	(Signature of Director or Officer listed in number 12 of the application)	-
14. Catl	herine Ruf, Secretary/Treasurer	
··· <u></u>	(Typed or printed name and capacity of person signing application)	-

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### NATIONAL SALVAGE & SERVICE CORPORATION

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 13, 1988, and was in existence or authorized to transact business in the State of Indiana on June 30, 2005.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirtieth Day of June, 2005.

TODD ROKITA, Secretary of State

1988012286 / 2005063087395