F03000005245

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
10/16 PPC			

Office Use Only



400023716454

10/16/03--01036--021 **70.00

HLM

FILED 03 00 16 PM 2: 52

TRANSMITTAL LETTER

Division of Con			_	
SUBJECT: MA	west chem	ICAL & Se	aply Court	
	(Name of corpor	ation - must include suffix)		
Dear Sir or Madam:	*			
	on by Foreign Corporation ", and check are submitted ida.			
Please return all correspondent	ondence concerning this ma	tter to the following:		
MALIO	ACUALEZ	_		
	(Nam	e of Person)		
MAWEST	Chenica	& Sulphy	· C.	
- 0	(Firm.	(Company)		
281 Mo.	erison to	AN		
	· (A	(ddress)		
Colombo	5, DH	432	13	
	(City/Sta	ate and Zip code)	· · · · · ·	
For further information	concerning this matter, plea	se call:		
MARIO ALVALEZ at (614, 332-32-99				
MALIO ACUALEZ at (614) 332-32-99 (Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS:		MAILING ADDRES	88.	
Registration Section		Registration Section	Registration Section	
Division of Corporations	S	-	Division of Corporations	
409 E. Gaines St. Tallahassee, FL 32399			14	
Enclosed is a check for t	he following amount:			
W com on Pillian Par	1 c,	A AMA WE THE TO A	en and to the th	
\$70.00 Filing Fee	© \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & 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 REGISTIER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
· Min West Observant & Sundy Comming
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
MSWEST CHENIA & SUPPLY OF FLORIDA
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. <u>Oh 10</u> 3. <u>31-1621784</u>
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11-1-98 5.
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 10-13-03
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 6175 DAVENS CORNERS RO. Blocklick on 43004
(Principal office address)
384 Maraison RD - Columbus Chio 43213
(Current mailing address)
8. DISTRIBUTION Resole
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: XXX SameZ
14 1 25 N
(City) Florida 5/18 (Zip code)
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.
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.
- Star x f
(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. DIRECTORS		
Chairman: // Maio Musuet		
Address: 6175 HOVEN BUNEAR RO-		
Blocklich of 43004		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President:		
Address:		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: fracessary, you may attach an addendum to the application listing additional officers and/or directors.		
13. (Signature of Director or Officer listed to number 12 of the application)		
(Signature of Director of Officer distert institution 12 of the application)		
(Typed or printed name and capacity of person signing application)		

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show MIDWEST CHEMICAL & SUPPLY COMPANY, an Ohio corporation, Charter No. 1040990, having its principal location in Columbus, County of Franklin, was incorporated on November 05, 1998 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 13th day of October, A.D. 2003

Ohio Secretary of State

Validation Number: V2003286010F1E