Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092

Fax Number : (850)878-5368

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 PROFIT/NONPROFIT CORPORATION Pintsch Tiefenbach US, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

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Corporate Filing Menu

Help

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COVER LETTER

TO: New Filing Se Division of Co				
SUBJECT: Pintsch	Tiefenbach US, Inc.			
	Name of corpor	ation - must include suffix	,	
Dear Sir or Madam:				
"Certificate of Existen	ation by Foreign Corporation ice," or "Certificate of Good gn corporation to transact be	n for Authorization to Transad Standing" and check are sub usiness in Florida.	ct Business in Florida," mitted to register the	
Please return all corres	spondence concerning this m	natter to the following:		
Bennie Manion				
	Nam	e of Person		
Pintsch Tiefenbach US,	Inc.			
	Firm	/Company		
810 Skyline Drive				
	F	Address		
Marion, 1L 62959				
	City/St	ate and Zip code		
b.manion@pintschtiefen				
	E-mail address: (to be u	ised for future annual report r	notification)	
For further information	n concerning this matter, ple	ease call:		
Mary Overturf	at (618	993-8513		
Name of Perso	on A	Area Code & Daytime Telepho	one Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for	r the following amount:			
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

9/18/2014 10:14:22 From: To: 8506176381

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 "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") Iff name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business Delaware (State or country under the law of which it is incorporated) November 23, 2011 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. Store Sections (Current mailing address) SAME (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: Plantation (City) Plantation Florida (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporates also generated agent and to accept the appointment as registered agent and agree to act if further agree to comply with the provisions of all statutes relative to the proper and complete performances, and I am familiar with and accept the obligations of my position as registered agent.				ch US, Inc.	Pintsch Tiefenbach
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) SAME (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: C T Corporation System (City) (Plantation (City) (Piorida 33324 (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporates for the application, I hereby accept the appointment as registered agent and agree to act in further agree to comply with the provisions of all statutes relative to the proper and complete performances, and I am familiar with and accept the obligations of my position as registered agent.		OMPANY," "CORPORATION,"	ORPORATED," "CO		
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C.T. Companion System	nct in this copacity. formance of my	it as registered agent and agree to act tive to the proper and complete perfo y position as registered agent.	pt the appointment of all statutes relativ	ed as registered agent and to application, I hereby accept amply with the provisions of amiliar with and accept the o	Having been named a designated in this app further agree to comp duties, and I am fam.
Concle 1900		Connie Bryan		T Corporation System	
By: Comit Bayon (Registered agent's signature) (Section 2000)			chan	Connu Band	Ву:

10. 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.

II. Name	es and business addresses of officers and/or directors:			
A. DIRE	CTORS			
Chairman:				
Address: _			. — <u>. — .</u>	
_				
Vice Chair	map:			
Address: _				
_				
Director:	Bennie Manion, President			
Address: _	810 Skyline Drive			
	Marian, 14 62959			
Director;		<u> </u>	14	
Address: _		<u> </u>	\frac{\frac{2}{3}}{\frac{2}{3}}}	_17,4 ;
		(a) 15		
B. OFFI	CERS		3	
President:	Bennie Manion	<u> </u>		·
Address:	810 Skyline Drive	<u>\$</u> m	23	
	Marion, IL 62959			
Vice Presi	dent: Achim Weirather			
Address:	Besenbrustrasse 10			
	Sprackhavel, Germany 45549			. <u>-</u> .
Secretary:				
Address:			<u> </u>	
Treasurer:				
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and	or direct	ofs.	
12	Bennie & Marion Signature of Director or Officer			
are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 12 above) affirms that the nd that he or she is aware that false information submitted in a document to the Department gree felony as provided for in s.817.155, F.S.	e facts sta it of State	ted he const	rein itutes
13. Benn	nie Manion, President			
	(Typed or printed name and capacity of person signing application)			

Delaware

DACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PINTSCH TIEFENBACH US, INC." IS
DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS
IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS
THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF
SEPTEMBER, A.D. 2014.

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

AND I DO REREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

SECRETALY OF CLATE

5070141 8300

141192854

You may verify this certificate online at cosp. delaward. gov/authour, shimi

Jolliny W. Bullock, Secretary of State

DATE: 09-18-14