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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.  
Account Number : 076666003611  
Phone : (941)748-0100  
Fax Number : (941)745-2093

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: epennington@blalockwalters.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Select Machinery of Florida, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 SEP 17 A 8:44

FILED

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.

Select Machinery, Inc.

1. Select Machinery of Florida, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ins.," "Co.," or "Corp.")

Select Machinery of Florida, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 11-2978250  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 13, 1989 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. Yes to occur  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 64-30 Ellwell Crescent, Rego Park, NY 11374-5031  
(Principal office address)

4590 Ashton Road, Sarasota, FL 34233  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

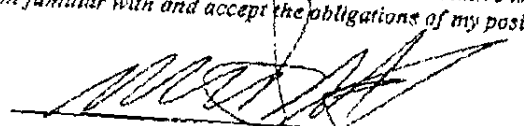
Name: Blalock Walters, P.A.

Office Address: 802 11th Street West

Bradenton, Florida 34205  
(City) (Zip code)

9. 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)

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.

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ALLAHRASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Henry Koelmei  
4590 Ashton Road  
Address: Sarasota, FL 34233

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Henry Koelmei  
4590 Ashton Road  
Address: Sarasota, FL 34233

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

B. OFFICERS

President: Henry Koelmei  
4590 Ashton Road  
Address: Sarasota, FL 34233

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Henry P. Koelmei  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Henry Koelmei, President  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

State of New York  
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SELECT MACHINERY INC. was filed on 07/13/1989, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



\*\*\*

*WITNESS my hand and the official seal of the Department of State at the City of Albany, this 11th day of September two thousand and fifteen.*

A handwritten signature in cursive script that reads "Anthony Scardino".

*Executive Deputy Secretary of State*