

FL0000003846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

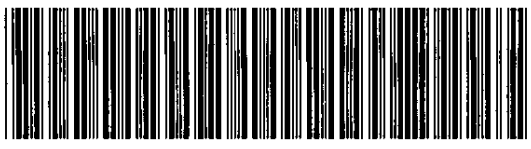
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations
Coeclerici Coal Network, Inc

SUBJECT: _____
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," or "Certificate of Good Standing" 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:
Amy Jo Larkin

Name of Person
Coeclerici Coal Network, Inc

Firm/Company
7697 Innovation Way, Suite 100

Address
Mason, Ohio 45040

City/State and Zip code
alarkin@coeclerici.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Jo Larkin 513 701-0373

Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 & Certificate of Status \$78.75 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 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Cocclerici coal Network, Inc

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Ohio 47-2301636

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
11/12/2014

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
3/1/2016

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7697 Innovation Way, Suite 100, Mason, Ohio 45040

7. _____
(Principal office address)

(Current mailing address, if different)


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

Name: Business Filings Incorporated
1200 South Pine Island Road

Office Address: Plantation, Florida 33324
(City) (Zip code)

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 TALLAHASSEE, FLORIDA

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.

 Brian Klassen - Asst. Secretary for Business Filings Incorporated
(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.

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

A. DIRECTORS

Urbano Clerici

Chairman: _____
Palazzo Mantegazza, Riva Paradiso 2
Address: _____
CH-6900 Lugano-Paradiso, Switzerland

Vice Chairman: _____
Address: _____

Director: _____
Gerald Quitter
6152 High Cedar Court
Address: _____
Cincinnati, Ohio 45233

Director: _____
Ramesh Malhotra
7697 Innovation Way, Suite 100
Address: _____
Mason, Ohio 45040

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B. OFFICERS

Gerald Quitter

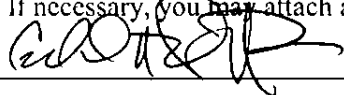
President: _____
6152 High Cedar court
Address: _____
Cincinnati, Ohio 45233

Vice President: _____
Address: _____

Secretary: _____
Suzanne Miller
7921 Woodglen Drive, West Chester, Ohio 45069

Treasurer: _____
Amy Jo Larkin
241 Indian Pointe Drive, Maineville, Ohio 45039
Address: _____

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

12.  _____
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. Gerald A Quitter, CEO
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, 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 business entities; that said records show COECLERICI COAL NETWORK, INC., an Ohio corporation, Charter No. 2342868, having its principal location in Cincinnati, County of Hamilton, was incorporated on November 12, 2014 and is currently in GOOD STANDING upon the records of this office.

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TALLAHASSEE, FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 22nd day of August, A.D. 2016.

Jon Husted

Ohio Secretary of State

Validation Number: 201623502464