

F21000001400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

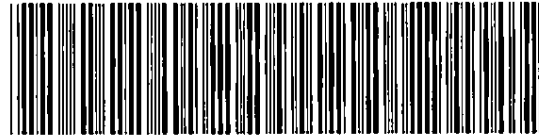
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

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W21000032145

Office Use Only



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3-8 PM 2:09

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3/15/21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2021

CSC

SUBJECT: AM CONSERVATION GROUP, INC.
Ref. Number: W21000032145

RESUBMIT

Please give original
submission date as file date.

3/8/21

We have received your document for AM CONSERVATION GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,050.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 021A00004997

2021 MAR 11 10:21:05

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 680731 8202084
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 1050.00

ORDER DATE : February 25, 2021
ORDER TIME : 10:42 AM
ORDER NO. : 680731-020
CUSTOMER NO: 8202084

FOREIGN FILINGS

NAME: AM CONSERVATION GROUP, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AM Conservation Group, Inc.

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:

Jennifer Underwood

Name of Person

AM Conservation Group, Inc.

Firm/Company

102 N. Franklin Street

Address

Port Washington, WI 53074

City/State and Zip code

junderwood@franklinenergy.com

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

For further information concerning this matter, please call:

Jennifer Underwood

at (262) 284-3838 x 1025

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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.

1. AM Conservation Group, Inc.
(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)

2. New Jersey 3. 22-3303805
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/22/1994 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. January 1, 2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1701 Charleston Regional Pkwy Ste. A, Charleston, SC 29492
(Principal office street address)
102 N. Franklin Street, Port Washington, WI 53074
(Current mailing address, if different)


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

Name: Corporation Service Company

Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

Corporation Service Company
By: 
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS.

Chairman Name: Jim Madej
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other CEO Other _____

Chairman Name: John Bailes
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

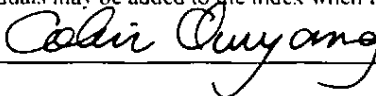
Chairman Name: Colin Owyang
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Eileen Cavanaugh
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Tina Semotan
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other CAO Other _____

Chairman Name: Marisa Uchin
 Vice Chairman Address: 102 N. Franklin St.
 Director Port Washington, WI 53074
 President _____
 Vice President _____
 Secretary Treasurer
 Other CCO Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. Colin Owyang, General Counsel & Secretary
 (Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

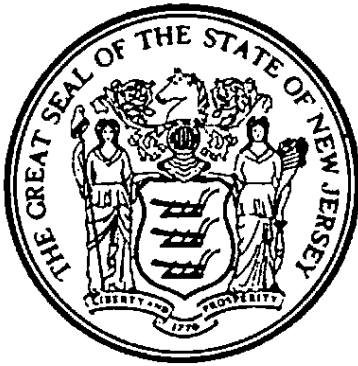
**AM CONSERVATION GROUP, INC.
0100585803**

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on April 22, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

*CORPORATION SERVICE COMPANY
PRINCETON SOUTH CORPORATE CTR
STE 160, 100 CHARLES EWING BLVD
EWING, NJ 08628*



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
5th day of March, 2021*

A handwritten signature in black ink, appearing to read 'Elizabeth Maher Muoio'.

*Elizabeth Maher Muoio
State Treasurer*

Certificate Number : 6116401582

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp