

# F98000005824

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: LYKINS OIL COMPANY  
(Name of corporation - must include suffix)

300002666933--0  
-10/19/98--01082--002  
\*\*\*\*\*122.50 \*\*\*\*\*78.75

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

DAVID WEHRUNG  
(Name of Person)  
LYKINS OIL COMPANY  
(Firm/Company)  
5300 DUPONT CIRCLE  
(Address)  
MILFORD, OHIO 45150  
(City/State/Zip)

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9/10/19

Should you need to call someone concerning this matter, please call:

DAVID WEHRUNG at (513) 831 8820  
(Name of Person) (Area Code & Daytime Telephone Number)

### COURIER ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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. LYKINS OIL COMPANY  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. OHIO 3. 31-1452295  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/4/96 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 11/01/98  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 5300 DUPONT CIRCLE  
MILFORD, OHIO 45150  
(Current mailing address)

8. PETROLEUM RESELLER  
(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: C T CORPORATION SYSTEM

Office Address: 1200 S. PINE ISLAND RD.

PLANTATION, Florida, 33324  
(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. 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.*

Susan J. Metzger  
(Registered agent's signature)

**Susan J. Metzger**  
Assistant Secretary

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.

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12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: NONE

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

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

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

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

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

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

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: DONALD F LYKINS

Address: 147 MIAMI LAKES DR

MILFORD, OHIO 45150

Vice President: DONALD J LYKINS

Address: 943 HIDDEN RIDGE DR.

MILFORD, OHIO 45150

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

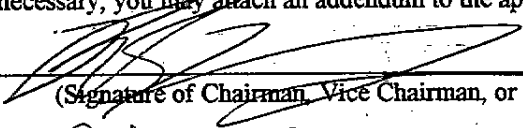
Address: \_\_\_\_\_

Treasurer: ROBERT J. MANNING

Address: 3239 PARK HILL DR.

CINCINNATI, OHIO 45248

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

13.  \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. ROBERT J. MANNING TREASURER

(Typed or printed name and capacity of person signing application)

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

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*I, Bob Taft, 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 **LYKINS OIL COMPANY**, an Ohio corporation, Charter No. 928158, having its principal location in Milford, County of Clermont, was incorporated on January 4, 1996, and is currently in **GOOD STANDING** upon the records of this office.*



WITNESS my hand and official  
seal at Columbus, Ohio on  
October 1, 1998

*Bob Taft*

Bob Taft  
Secretary of State

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