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SECRETARY OF STATE
TALL AHASSEF, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: STEVEN A MARCOALDI Co (Name of corporation - must include suffix)				
(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", 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:				
STEVEN A MARCOALDI, PRESIDENT (Name of Person)				
(Name of Person)				
STEVEN A MARCOALDI CO				
(Firm/Company)				
5824 BEE RIDGE RD #304 (Address)				
(Address)				
SARASOTA, FL 34233				
(City/State and Zip code)				
For further information concerning this matter, please call:				
STEVEN A MARCOALDI at (941) 400 - 4975 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  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 Secretificate of Status Certified Copy Secretified Co				

## - 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.

I. STEV	EN A MARCOALDI CO		
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION	ON,"
(If name unavai	lable in Florida, enter alternate corporate na	me adopted for the purpose of transact	ting business in Florida)
2. OHIO		3. 34-1330015	
(State or country	under the law of which it is incorporated)	(FEI number, if ap	pplicable)
4. MARCH	1981	5. PEPETUAL (Duration: Year corp. will cease	
(Dat	e of incorporation)	(Duration: Year corp. will cease	to exist or "perpetual")
6. UPON	QUALIFICATION		
(Date first transa	acted business in Florida. If corporation has	not transacted business in Florida, ins 501, 607.1502 and 817.155, F.S.)	ert "upon qualification.")
7. 5824	BEE RIDGE RD 4-30	4, SARASOTA, FL	34233
	(Principal office	address)	
SAME	<u>.</u>		
	(Current mailing	address)	<u> </u>
		_	
8. LANDSC	APE MAINTENANCE OF	2 OTHER LEGAL PLY	RPOSE
(Purposei	(s) of corporation authorized in home state o	or country to be carried out in state of F	попаа)
9. Name and <u>st</u>	<u>eet address</u> of Florida registered agen	t: (P.O. Box or Mail Drop Box No.	OT acceptable)
Name:	STEVEN A MARCOALD	<u></u>	-: ·
Office Address:	2035 OLD TRENTON L	<u> </u>	
	SARASOTA (City)	Florida 34232	
	(City)	(Zip code)	SE ZE
10 Registered s	ngent's acceptance:		
	ned as registered agent and to accept se	ervice of process for the above state	ed corporation at the place
designated in thi	s application, I hereby accept the appoi	intment as registered agent and ag	ree to act in this capacity. I
	comply with the provisions of all statute ir with and accept the obligations of my		ete performance of myfauties
	^	Language and and and an and an and an	STA III
	Itare. a Marc	onldi	20 RIDA
-	(Registered agent's signatu	ure)	<del></del>

- 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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: STEVEN A MARCOALDI
Address: 5824 BEE RIDGE RD #304
SARASOTA, FL 34233
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: STEVEN A MARCOALDI
Address: 5824 BEE RIDGE RD #304
SAPASOTA, 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.
13. Steven a Marcoaldi
(Signature of Director or Officer listed in number 12 of the application)  14. STEVEN A MARCOALDI, PRESIDENT
14. STEVEN A MARCOALDI, PRESIDENT (Typed or printed name and capacity of person signing application)

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

I, J. Kenneth Blackwell, 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 STEVEN A. MARCOALDI CO., an Ohio Corporation, Charter No. 570326, having its principal location in Canton, County of Stark, was incorporated on March 04, 1981, and is currently in GOOD STANDING upon the records of this office.

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 29th day of December, A.D. 2004.

Ohio Secretary of State

