# F0600001073

(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVERLETTER  O6 FEB 15  M 9 32  TO: Registration Section Division of Corporations				
COVER LETTER TALLAHASSA M 9-32				
TO: Registration Section Division of Corporations				
SUBJECT: Michael NIACK + NC.				
(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:				
Michael MACK (Name of Person)				
(Name of Person)				
Michael MACK INC  (Firm/Company)  P.O BOX 698- 33 Industrial Rd  (Address)  BROWNStown PA 17508  (City/State and Zip code)				
(Firm/Company)				
P.O Box 698. 33 Industrial Rd				
(Address)				
BROWNSTOWN PA 17508				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Mil. 1 Mark 217 AVA 2300				
Michael MACK at (717) 940-3305  (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: MAILING ADDRESS:  Pagintention Section				
Registration Section Registration Section Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32314				
Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee				

### 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.	Michael MACK INC.				
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"				
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	Alla My				
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2.	State or country under the law of which it is incorporated)  3. 23-270459765  (FEI number, if applicable)				
	State or country under the law of which it is incorporated)  (FET number, if applicable)				
4.	11-12-1992 5. Perpetual  (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
6.					
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
	33 Industrial Rd P.D. Box 698 BROWNSTOWN PG				
7.	(Principal office address)				
	P.O Box 698 BROWNS town PA 17508				
-	(Current mailing address)				
8.	Wholesale GARAGE Storage Products ( 2nd Location )				
	(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 NOT acceptable)					
	Name: Joseph Allegro				
Of	fice Address: 10330 Chedoak Ct. 74401				
	Jacksonville, Florida 322/8				
	(City) (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.

(Registered agent's signature)

- 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:				
Address:	<i></i>			
Address:	<del> </del>			
Vice Chairman:				
Address:				
Director:				
Address:				
Director:				
Address:				
B. OFFICERS				
President: S. Michael MACK				
Address: 503 Bedford Pl.				
Address: 503 Bedford Pl.  L:t.+2 PA 17543				
Vice President:				
Address:				
Secretary: Beth L. MACK  Address: 503 Bedford Pl Lititz PA 175				
Address: 503 Bedford Pl Lititz PA 175	43			
Treasurer: Beth L. MACK				
Address: 503 Bedford Pl Lititz PA 175	2,43			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or	directors.			
13. Michael Mack PResident (Signature of Director or Officer listed in number 12 of the application)	<del></del>			
14. S. Michael MACK President.				
(Typed or printed name and capacity of person signing application)				

## COMMON WEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

January 24, 2006

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

OF EB IS MY 32

I DO HEREBY CERTIFY THAT,

### MICHAEL MACK, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth