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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton MAY 23 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Volk Protective Products, 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," 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:

Kimberly K. Duttlinger

(Name of Person)

D.P. Kelly & Associates, L.P.

(Firm/Company)

190 Harger Road, Suite 190

(Address)

Oak Brook, Illinois 60523

(City/State and Zip code)

For further information concerning this matter, please call:

Kim Duttlinger

(Name of Person)

at (630) 575-2346

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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.

1. **Volk Protective Products, 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. **Delaware**

(State or country under the law of which it is incorporated)

3. **72-1553789**

(FEI number, if applicable)

4. **January 6, 2003**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **Not Applicable**

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

7. **2425 Spiegall Dr., Groveport, OH 43125**

(Principal office address)

2425 Spiegall Dr., Groveport, OH 43125

(Current mailing address)

8. **To distribute and sell safety products for food service industries**

(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: **Southern Bakeries, Inc., Attn. Arthur Krantz**

Office Address: **3355 W. Memorial Blvd.**

Lakeland

(City)

Florida 33801

(Zip code)

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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.



F. Edward Gustafson, President Southern Bakeries, Inc.

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: Not Applicable

Address: _____

Vice Chairman: Not Applicable

Address: _____

Director: Anthony R. Volk

Address: 1335 Ridgeland Parkway, Suite 120

Alpharetta, GA 30004

Director: _____

Address: _____

B. OFFICERS

President: Anthony R. Volk

Address: 1335 Ridgeland Parkway, Suite 120

Alpharetta, GA 30004

Vice President: James Bradley Gustafson

Address: 2146 Elmwood

Wilmette, IL 60091

Secretary: Kimberly K. Duttlinger

Address: 701 Harger Road, Suite 190, Oak Brook, IL 60523

Treasurer: Robin I. Katz

Address: 1335 Ridgeland Parkway, Suite 120, Alpharetta, GA 30004

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

13. Kimberly K. Duttlinger

(Signature of Director or Officer listed in number 12 of the application)

14. Kimberly K. Duttlinger, Secretary

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

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VOLK PROTECTIVE PRODUCTS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MAY, A.D. 2006.



3611359 8300

060461640

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4749620

DATE: 05-16-06