#### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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

## COR AMND/RESTATE/CORRECT OR O/D RESIGN H & H INDUSTRIES OF WISCONSIN, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

Requesting original submission date of 8-30-18, thank you!

Electronic Filing Menu

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Corporate Filing Menu

Help

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

### SECTION I (1-3 MUST BE COMPLETED)

(1-3	SIONI BE COM BECEN
F15000	900009:1
(Document	number of corporation (if known) .
H & H Industries, Inc. d/b/a H & H Industrie	es of Wisconsin, Inc.
I.	appears on the records of the Department of State)
2 Wisconsin	3. O1/06/2015 (Date authorized to do business in Florida)
(Incorporated under laws of)	(Date authorized to do business in Florida)
(4-7 COMPLETE	SECTION II CONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the cor	poration, when was the change effected under the laws of 칒 🥏
its jurisdiction of incorporation? 07/23/2018	
5, 1901 Inc.	
appropriate abbreviation, if not contained in	
(If new name is unavailable in Florida, enter al business in Florida)	ternate corporate name adopted for the purpose of transacting
6. If the amendment changes the period of durati	ion, indicate new period of duration.
	(New duration)
7. If the amendment changes the jurisdiction of i	incorporation, indicate new jurisdiction.
	(New jurisdiction)
8. Attached is a certificate or document of similar 90 days prior to delivery of the application to having custody of corporate records in the juri	ir import, evidencing the amendment, authenticated not more that the Department of State, by the Secretary of State or other official isdiction under the laws of which it is incorporated.
(Signature of a direc	Sective for the street of the first the stands are court appointed fiduciary, by that fiduciary)
Melissa Wood	Corporate Secretary
(Typed or printed name of person signing)	(Title of person signing)

#### United States of America

#### State of Wisconsin



#### DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

1

I, Mary Ann McCoshen, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that Articles of Amendment were filed with this department effective July 23, 2018, changing the name of H & H INDUSTRIES, INC. to the present name of 1901 INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 30, 2018.

MARY ANN McCOSHEN, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

BY:

#### United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS



#### Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I. Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### 1901 INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 18, 1974.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 29, 2018.

MARY ANN MCCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

#### To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 227343-52716F93