

F 15000001239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3/25/15

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Marco, 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," or "Certificate of Good Standing" 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:

Pam Kotzenmacher

Name of Person

Firm/Company

4510 Heatherwood Road

Address

Saint Cloud, MN 56301

City/State and Zip code

pam.kotzenmacher@marconet.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Kotzenmacher

at (320) 650-1853

Name of Person

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

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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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2015

PAM KOTZENMACHER  
4510 HEATHERWOOD ROAD  
SAINT CLOUD, MN 56301

SUBJECT: MARCO, INC.  
Ref. Number: W15000016456

We have received your document for MARCO, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 415A00004697

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TALLAHASSEE, FLORIDA

**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. Marco, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Marco, Inc. - Florida  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Minnesota 3. 41-0991721  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/6/1972 5. 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)
7. 4510 Heatherwood Road, Saint Cloud, MN 56301  
(Principal office address)
- 4510 Heatherwood Road, Saint Cloud, MN 56301  
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

**9. 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.*

By: NRAI Services, Inc. Michele Miller  
(Registered agent's signature) Assistant Secretary

10. 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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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

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**A. DIRECTORS**

Chairman: Jeff Gau

Address: 4510 Heatherwood Road  
Saint Cloud, MN 56301

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TALLAHASSEE, FLORIDA

Vice Chairman: Jennifer Mrozek

Address: 4510 Heatherwood Road  
Saint Cloud, MN 56301

Director: Gary Marsden

Address: 4510 Heatherwood Road  
Saint Cloud, MN 56301

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

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

**B. OFFICERS**

President: Jeff Gau (CEO)

Address: 4510 Heatherwood Road  
Saint Cloud, MN 56301

Vice President: Jonathan Warrey (COO)

Address: 4510 Heatherwood Road  
Saint Cloud, MN 56301

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

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

Treasurer: Jennifer Mrozek (CFO)

Address: 4510 Heatherwood Road, Saint Cloud, MN 56301

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Jennifer Mrozek, CFO

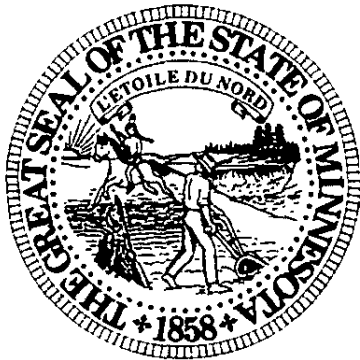
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Marco, Inc.  
Date Filed: 12/06/1972  
File Number: 2E-1078  
Minnesota Statutes, Chapter: 302A  
Home Jurisdiction: Minnesota

This certificate has been issued on: 03/18/2015



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota

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TALLAHASSEE, FLORIDA