

**F15000001822**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

**((H15000103393 3)))**



H15000103393ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**  
Division of Corporations  
Fax Number : (850) 617-6381

**From:**  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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

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

**FOREIGN PROFIT/NONPROFIT CORPORATION  
TRENCH PLATE RENTAL CO.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

**FILED**  
15 APR 28 PM 12:08  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

15 APR 28 AM 11:16  
TALLAHASSEE, FLORIDA

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

4 7915 16

### COVER LETTER

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

**SUBJECT:** TRENCH PLATE RENTAL CO.

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:

JANET HAMBARSOUMAIN

Name of Person

TRENCH PLATE RENTAL CO.

Firm/Company

13217 LAURELDALE AVE

Address

DOWNEY, CA 90242

City/State and Zip code

JHAMBARSOUMIAN@TPRCO.COM

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

For further information concerning this matter, please call:

JANET

Name of Person

at 562 602-1777 EXT 2010

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. TRENCH PLATE RENTAL CO.**

(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. CALIFORNIA**

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

**3. 95-3542366**

(FEI number, if applicable)

**4. 11/3/1980**

(Date of incorporation)

**5. PREPETUAL**

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

**6. 4-22-2015**

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

**7. 1906 E CASE STREET JOLIET, FL 60432**

(Principal office address)

**13217 LAURELDALE AVE DOWNEY, CA 90242**

(Current mailing address)

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

Name: **CT Corporation System**

Office Address: **1200 South Beach Island Road**

**Plantation**

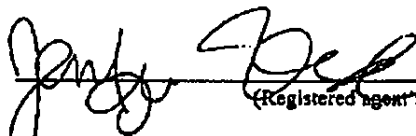
(City)

**Florida 33324**

(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.*



(Registered agent's signature)

**Jenifer Vincent**  
Vice President & 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.**

FILED  
15 APR 28 PM 4:08  
STATE DEPT OF FLORIDA  
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

B. OFFICERS

President: GRAMME GILFILLAN

Address: 13217 LAURELDALE AVE DOWNEY, CA 90242  
\_\_\_\_\_

Vice President: WILLIAM FICK

Address: 13217 LAURELDALE AVE DOWNEY, CA 90242  
\_\_\_\_\_

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

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

Treasurer: \_\_\_\_\_

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

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

12. Will H Fick

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. William Fick, Vice President

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

**State of California**  
**Secretary of State**  
**CERTIFICATE OF STATUS**

**ENTITY NAME:**

**TRENCH PLATE RENTAL CO.**

**FILE NUMBER:** C1028992  
**FORMATION DATE:** 11/03/1980  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of April 23, 2015.

**ALEX PADILLA**  
**Secretary of State**

**MAK**