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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Memco Inc	
Name of corporation - 1	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business	ng" and check are submitted to register the
Please return all correspondence concerning this matter to	the following:
Patti Ohm	
Name of Per	rson
Memco Inc	
Firm/Compa	ny
296 Carlton Rd	
Address	
Hollister, MO 65672	
City/State and	Zip code
patti.ohm@themiddletongroup.com	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call	:
Patti Ohm	334-6681
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
<u> </u>	\$78.75 Filing Fee & Sertified Copy Sertified Copy 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.

Memco Inc					
	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	,		
Memco Safety I	nc				
(If name unavails	ble in Florida, enter alternate corporate name add	opted for the purpose of transacting	business in Florida)		
Missouri	3. 43	3-1165722			
	y under the law of which it is incorporated)	(FEI number, if applicable)			
6/2/1978	5.				
(Date	of incorporation)		(Date of duration, if other than perpetual)		
296 Carlton Rd, I	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502  follister, MO 65672  (Principal		y)		
<del></del>	(Current mailing	address, if different)			
	•	·			
Name and <u>stree</u> Name:  Office Address:	nrai services, Inc.  1200 South Pine Island Road	Box <u>NOT</u> acceptable)	-8 FR 10		
Name:	NRAI Services, Inc.	Box <u>NOT</u> acceptable)  , Florida			

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: Agnes Broszczak, Asst. Secretary

(Registered agent's signature)

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.

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

A. DIRI	ECTORS			
Chairman	:			
Address:				
Vice Chai	rman:			
Address:				
_				
Director:	Julie Middleton			
Address:	296 Carlton Rd			
	Hollister, MO 65672			
Director:	Robert Middleton			
Address:	296 Carlton Rd			
	Hollister, MO			
B. OFFI	ICERS			
President:	Julie Middleton	<b>&gt;</b> -	N.0 535 735	
Address:	296 Carlton Rd	22	121 121	Salares (Larres
	Hollister, MO 65672	0. E.	; (3)	Estimates
Vice Presi	J Kimberly Crosby	: n,	<u> </u>	का नवार कर । के डे ए
Address:	296 Carlton Rd	<u></u>	<del></del>	
	Hollister, MO 65672	ī. r	Ö	
Secretary:	Robert Middleton			
Address:	Same			
Treasurer:	Robert Middleton			
Address:	Same			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	ınd/or di	rectors	i.
12				
The offic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that	the fact	s stated	d herein
are true a	nd that he or she is aware that false information submitted in a document to the Departm			
13	egree felony as provided for in s.817.155, F.S.			
···· <del>/</del> )	(Typed or printed name and capacity of person signing application)	-		

STATE OF MISSOURY



### Jason Kander Secretary of State

## CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### MEMCO, INC. 00201192

was created under the laws of this State on the 2nd day of June, 1978, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 27th day of January, 2016.

Secretary of State

Certification Number: CERT-01272016-0082