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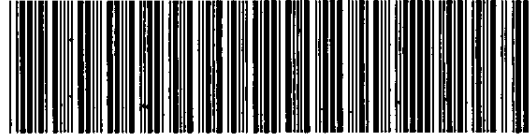
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 MAR -9 PM 12:30

MAR 10 2016

S. YOUNG

**BARKAN & ROBON LTD.**

ATTORNEYS AT LAW  
1701 WOODLANDS DRIVE, SUITE 100  
MAUMEE, OHIO 43537-4056  
(419) 897-6500  
FAX (419) 897-6200  
www.barkan-robon.com

OFFICES IN OREGON, OHIO  
& BOWLING GREEN, OHIO

WILLIAM I. BARKAN  
MARVIN A. ROBON  
PAUL A. RADON  
JOSEPH R. TORDA  
R. ETHAN DAVIS  
ZACHARY J. MURRY\*  
BRUCE B. STEVENS

\*ALSO ADMITTED IN MICHIGAN  
AND MARYLAND

March 8, 2016

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
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Re: Application by Foreign Corporation  
SSOE Systems, Inc.

To Whom It May Concern:

Enclosed is SSOE Systems Inc.'s Application by Foreign Corporation for Authority to Transact Business in Florida. I have also enclosed a check in the amount \$78.75 for the filing fee and Certificate of Status, as well as a listing of officers and directors and an Ohio Certificate of Good Standing. Please process this application and send the Certificate of Status back to me at the address listed on the Cover Letter.

Should you have any questions, do not hesitate to contact me.

Very truly yours,

BARKAN & ROBON, LTD.



Anne E. Scott  
Paralegal for William I. Barkan, Esq.

/aes  
Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
SSOE Systems, Inc.

**SUBJECT:** \_\_\_\_\_  
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:  
Anne E. Scott, Paralegal

\_\_\_\_\_  
Name of Person  
Barkan & Robon, Ltd.

\_\_\_\_\_  
Firm/Company  
1701 Woodlands Drive, Ste. 100

\_\_\_\_\_  
Address  
Maumee, Ohio 43537

\_\_\_\_\_  
City/State and Zip code  
ascott@barkan-robon.com

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

For further information concerning this matter, please call:

Anne E. Scott                      419                      897-6500  
\_\_\_\_\_  
Name of Person                      at (                      )                      Daytime Telephone Number  
Area Code

**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

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

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**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.**

SSOE Systems, Inc.

1. \_\_\_\_\_  
(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)  
Ohio 34-1190645

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
4/15/1976

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
1001 Madison Avenue, Toledo, Ohio 43606

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Registered Agent Solutions, Inc.

Name: \_\_\_\_\_

155 Office Plaza Dr. Ste. A

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

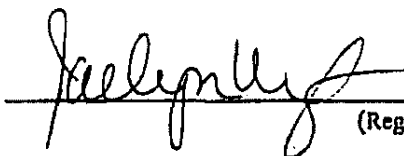
Tallahassee

32301

\_\_\_\_\_, Florida \_\_\_\_\_  
(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.*



Jaclyn Wright, 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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

See Attached listing of Officers and Directors

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

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

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

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

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

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

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

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

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**B. OFFICERS**

See Attached listing of Officers and Directors

President: \_\_\_\_\_

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

Vice President: \_\_\_\_\_

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

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

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

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

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

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

12. *Daniel J. Vining*  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Daniel J. Vining, President

13. \_\_\_\_\_

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

SSOE Systems Officers for 2016

Daniel J. Vining, President & Director

Harold R. Howell, Jr., Vice President & Director

Vincent P. DiPofi, Jr., Vice President & Director

Clem Wood, Vice President & Director

James J. Jaros, Vice President & Treasurer & Secretary & Director

Nate Czerniejewski, Director

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UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SSOE SYSTEMS, INC., an Ohio corporation, Charter No. 480251, having its principal location in Toledo, County of Lucas, was incorporated on April 15, 1976 and is currently in GOOD STANDING upon the records of this office.*

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*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 8th day of March, A.D. 2016.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201606800340