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| (Re | equestor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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MAY 17 2016 J SHIVERS





May 3, 2016

MARIANNE WINKLER 34800 BENNETT FRASER, MI 48026

SUBJECT: MP PUMPS, INC Ref. Number: W16000032449

We have received your document for MP PUMPS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The registered agent must sign accepting the designation.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00009116

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: MP. PUMPS 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: |
| MARIANNE WINKIER |
| MARIANAE WINKIER Name of Person |
| MP Amps Inc |
| Firm/Company |
| 34800 BENNETT |
| Address |
| FRASER MI 48026 |
| City/State and Zip code |
| MWINKIER a MARGINAPS. COM |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| MARIANJE WINKIER at (586) 293.8240 |
| 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 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301 |
| \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified 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.

| | orporation; must include ' | | COMPANY," "CORPORATIO | N," |
|--|-----------------------------|---|--|--|
| "Inc.," "Co.," "Ce | orp," "Inc," "Co," or "Co | rp.") | • | |
| | | | _ | |
| (If name unavaila | ble in Florida, enter alter | * | pted for the purpose of transacting | • |
| MICHIGAN 3. | | 38: 2846 541 | | |
| (State or country under the law of which it is incorporated) | | (FEI number, if applicable) | | |
| 1-1-89 | | 5 | | |
| (Date of incorporation) | | (Date of duration, if other than perpetual) | | |
| | (Date first | transacted business in Flo | orida, if prior to registration) | |
| • | | | F.S., to determine penalty liabil | ity) |
| 3118 | 100 BENNETT | FRASER MI | 48938 | |
| | | (Principal o | office address) | , |
| | | (Current mailing a | ddress, if different) | |
| | | (Curent maning a | udiess, ii different) | \$1 |
| Name and stree | t address of Florida re | gistered agent: (P.O. E | Box NOT acceptable) | 5 5 |
| Corporation Service Company Name: | | | | |
| | 1201 Hays Street | | ···· | 28 5 5 |
| Office Address: | | | 22201 | The state of the s |
| | Tallahassee | | 32301 , Florida | |
| | (C | lity) | (Zip code) | |
| | nt's acceptance: | Services | · | · · · · · · · · · · · · · · · · · · · |
| | | | of process for the above state it as registered agent and ag | |
| rther agree to co | omply with the provisi | ons of all statutes rela | tive to the proper and compl tive to the proper and compl to nosition as registered agen | ete performance of my |

(Registered agent's signature)

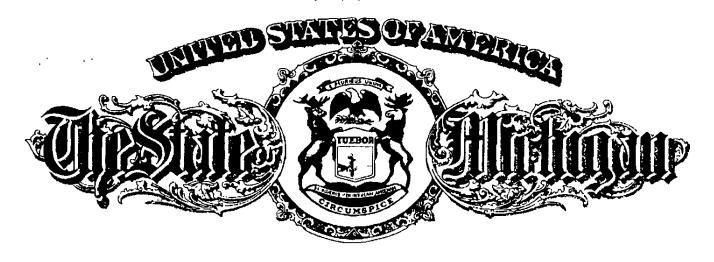
Corporation Service Company

Doreen S. Haeselin, Asst. VP

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. DIRECTORS Chairman: DAVID S BUVENIZER Address: 130 KEYSTONE DR Mariques VillE PA 18936 Vice Chairman: Address: Address: Director: Address: **B. OFFICERS** President: GREGORY REAbudy Address: 34800 BENNETT DA Vice President: Address: Secretary: VAN H MA. Address: 130 KEYSTONE DE MONTGONERVILLE 18936 Treasurer: Address: ____ NOTE: If necessary from that 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 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. 13. GRE9 PEAbody PRESIDENT

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





This is to Certify That

M. P. PUMPS, INC.

was validly incorporated on January 1, 1989, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 15th day of April, 2016.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau