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To: Division of Corporations  
Fax Number : (850) 617-6383

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 annual report mailings. Enter only one email address please.**

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Midwest Communications Technologies, Inc.**

|                       |         |
|-----------------------|---------|
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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.*

1. Midwest Communications Technologies, Inc.  
(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. Ohio 3. 31-1125137  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/03/1985 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 1000 Park Drive, Lawrence, PA 15055  
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

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.*

C T Corporation System

By: Carrie Bayen

(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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS SEE ATTACHMENT**

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: Timothy C. Huffmyer

Address: 1000 Park Dr

Lawrence, PA 15055

Vice President: Ronald Basso

Address: 1000 Park Dr

Lawrence, PA 15055

Secretary: Timothy C. Huffmyer

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

Treasurer: Timothy C. Huffmyer

Address: Lawrence, PA 15055

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 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. TIMOTHY C HUFFMYER, President

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

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TALLAHASSEE, FLORIDA

**Attachment to Florida  
Officers & Directors**

- 1    Full Name: Timothy C. Huffmyer  
     Officer/Director: Director  
     Officer's Title:  
     Director's Title: Director  
     Business Address:  
     City:  
     State:  
     ZIP Code:
- 2    Full Name: Ronald Basso  
     Officer/Director: Director  
     Officer's Title:  
     Director's Title: Director  
     Business Address:  
     City:  
     State:  
     ZIP Code:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 MIDWEST COMMUNICATIONS TECHNOLOGIES, INC., an Ohio corporation, Charter No. 652688, having its principal location in Columbus, County of Franklin, was incorporated on April 3, 1985 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 21st day of July, A.D. 2016.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201620301726