

F16000004985

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

(September 6, 2016)

PRO-LINE INDUSTRIAL PRODUCTS, INC
ATTN: SHERRI SAGAN
PO BOX 401
DIXON, CA 95620

SUBJECT: PRO-LINE INDUSTRIAL PRODUCTS INC
Ref. Number: W16000060828

RECEIVED
2016 OCT 31 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PRO-LINE INDUSTRIAL PRODUCTS 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 document must contain both the ~~street address of the principal office~~ and the ~~mailing address of the entity~~.

A certificate of existence or ~~a certificate of good standing~~, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Michelle Milligan
Senior Section Administrator

Letter Number: 616A00018708

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pro-Line Industrial Products, 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:

Sherri Sagan
Name of Person

Pro-Line Industrial Products, Inc
Firm/Company

PO Box 401
Address

Dixon, CA 95620
City/State and Zip code

Sherri@prolineindustrial.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherri Sagan at (707) 676-6150
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

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. Pro-Line Industrial Products, 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. CA 3. 47-3933984
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/13/2015 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)

7. 9730 Varie Ave Chatsworth, CA 91311
(Principal office address)
P.O. Box 401 Dixon, CA 95620
(Current mailing address, if different)

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

Name: Lisa L Jones

Office Address: 411 Hyacinth Dr #102
Pensacola, Florida 32506
(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.

Lisa L Jones
(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. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Lori Rehn

Address: 176 Regency Pkwy Clayton CA 94517

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Sherri Sagan

Address: 1830 Dailey Dr Dixon, CA 95620

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

12. *Sherri Sagan* COO

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. Sherri Sagan COO

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

2015 OCT 31 PM 2:54

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PRO-LINE INDUSTRIAL PRODUCTS, INC.

FILE NUMBER: C3776641
FORMATION DATE: 04/13/2015
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
OCT 31 PM 2:54
2016

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 October 24, 2016.

A handwritten signature in black ink, appearing to read "Alex Padilla".

ALEX PADILLA
Secretary of State