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(Re	questor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO: Registration Section Division of Corporations						
Dawn Enterprises, Inc.						
SUBJECT: Name of corporation - must include suffix						
-	must merade surm					
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation for a "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact business	ding" and check are submitted to register the					
Please return all correspondence concerning this matter Robert L Kovach	to the following:					
Name of I	Person					
Dawn Enterprises, Inc.						
Firm/Com	pany					
9155 Sweet Valley Dr.						
Addre	SS					
Valley View, OH 44125						
City/State ar	nd Zip code					
AMullins@dawn-ent.com						
E-mail address: (to be used f	or future annual report notification)					
For further information concerning this matter, please ca	all:					
Alicia Mullins 216	447-1777					
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: \$\Boxed{1}\$ \$70.00 Filing Fee \$\Boxed{1}\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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.

	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,)," "COMPANY," "CORPORATION,"
Automotive Pre	cision Manufacturing, Inc.		
(If name unavail	able in Florida, enter alternate corporate na	me :	e adopted for the purpose of transacting business in Florida)
Ohio		3	34-1139502
(State or count	y under the law of which it is incorporated)		(FEI number, if applicable)
3/8/1973 L		5.	
(Date	of incorporation)	٠.	(Date of duration, if other than perpetual)
·	Mote first transacted business	oc ir	in Florida if prior to registration)
2621 NE 9th	Ave Unit 14 Cape Coral, FL 33909	7.15	in Florida, if prior to registration) 1502, F.S., to determine penalty liability) cipal office address)
2621 NE 9th	(SEE SECTIONS 607.1501 & 60 Ave Unit 14 Cape Coral, FL 33909	7.15	1502, F.S., to determine penalty liability)
2621 NE 9th	(SEE SECTIONS 607.1501 & 60' Ave Unit 14 Cape Coral, FL 33909 (Privalley Dr. Valley View, OH 44125	7.15	1502, F.S., to determine penalty liability) sipal office address) ling address, if different)
2621 NE 9th	(SEE SECTIONS 607.1501 & 60° Ave Unit 14 Cape Coral, FL 33909 (Privalley Dr. Valley View, OH 44125 (Current ma	7.15	1502, F.S., to determine penalty liability) sipal office address) ling address, if different) O. Box NOT acceptable)
9155 Sweet V	(SEE SECTIONS 607.1501 & 60° Ave Unit 14 Cape Coral, FL 33909 (Privalley Dr. Valley View, OH 44125 (Current material address of Florida registered agent: (7.15	1502, F.S., to determine penalty liability) sipal office address) ling address, if different) O. Box NOT acceptable)
2621 NE 9th 9155 Sweet V Name and street Name:	(SEE SECTIONS 607.1501 & 60° Ave Unit 14 Cape Coral, FL 33909 (Privalley Dr. Valley View, OH 44125 (Current material address of Florida registered agent: (Paul Hutchins 2621 NE 9th Ave Unit 14)	7.15	1502, F.S., to determine penalty liability) sipal office address) ling address, if different) O. Box NOT acceptable)

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.

(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	of officers and/or directors:	
A. DIRECTORS		
Chairman:		
Address:		
		·
Vice Chairman:		
Address:	<u></u>	
Director:		
		
Director:		****
		The second secon
		and the second s
B. OFFICERS		
Robert L Kovach		11
5765 Brecksville Rd		DA 24
Address: Independence, OH 44131		
James Giglio		
Vice President:7800 Carter Rd		
Address: Sagamore Hills, OH 44067		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attac	ch an addendum to the application listing a	additional officers and/or directors.
12.	Signature of Director or Officer	
The officer or director signing this d are true and that he or she is aware t a third degree felony as provided for	document (and who is listed in number 11 that false information submitted in a document of the false in the f	above) affirms that the facts stated herein ment to the Department of State constitutes
13. JAMES GIG (Typed or p	orinted name and capacity of person signing	ng application)

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 DAWN ENTERPRISES, INC., an Ohio corporation, Charter No. 436557, having its principal location in Cleveland, County of Cuyahoga, was incorporated on March 8, 1973 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of November, A.D. 2016.

Ohio Secretary of State

Jon Hastel

Validation Number: 201631402592