

F17000002227

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

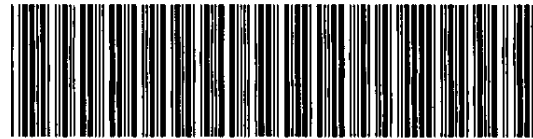
\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

W17-39943 Not Avail

Office Use Only



100298674531

05/05/17--01022--004 \*\*70.00

FILED

2017 MAY 16 AM 9:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

MAY 17 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
Power Manufacturing, 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:  
Peter J. Snyder, Esq.

\_\_\_\_\_  
Name of Person  
Peter J. Snyder, P.A.

\_\_\_\_\_  
Firm/Company  
21301 Powerline Road #106

\_\_\_\_\_  
Address  
Boca Raton, FL 33431

\_\_\_\_\_  
City/State and Zip code  
psnyder@lawinboca.com

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

For further information concerning this matter, please call:

Peter J. Snyder                      561                      367-1581  
\_\_\_\_\_  
Name of Person                      at (                      )                      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.*

Power Manufacturing, Inc.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

*Power Manufacturing of Orlando, Inc.*

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
Indiana 74-3207323

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
March 7, 2007

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

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
53087 Faith Avenue, Elkhart, IN 46514

7. \_\_\_\_\_  
(Principal office address)  
PO Box 670248, Coral Springs, FL 33067  
\_\_\_\_\_  
(Current mailing address, if different)

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

Peter J. Snyder, P.A.

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

21301 Powerline Road #106

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

Boca Raton

33433

(City)

, Florida

(Zip code)

**FILED**  
**2017 MAY 16 AM 9:56**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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.*

*Peter J. Snyder* President  
\_\_\_\_\_  
(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: \_\_\_\_\_

Timothy J. Ott, Jr.

5905 NW 54th Circle

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

Coral Springs, FL 33067

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

Mark Roberts

50635 C.R. 3, Elkhart, IN 46514

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

**B. OFFICERS**

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

Timothy J. Ott, Jr.

5905 NW 54th Circle

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

Coral Springs, FL 33067

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. 

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.

Timothy J. Ott, Jr., President

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

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

**FILED**  
2017 MAY 16 AM 9:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**State of Indiana**  
**Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

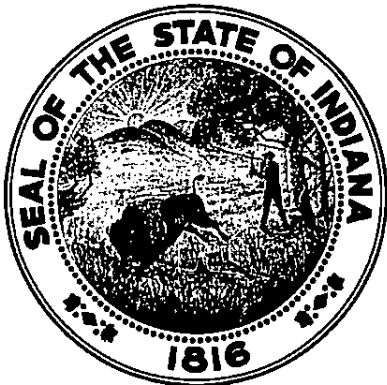
I further certify that records of this office disclose that

**POWER MANUFACTURING, INC.**

FILED  
2017 MAY 16 AM 9:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on March 07, 2007, and was in existence or authorized to transact business in the State of Indiana on May 02, 2017.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 02, 2017

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

2007030700123 / 2017294091

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 9, 2017

PETER J SNYDER, ESQ.  
PETER J. SNYDER, P.A.  
21301 POWERLINE RD. #106  
BOCA RATON, FL 33431

SUBJECT: POWER MANUFACTURING, INC.  
Ref. Number: W17000039943

We have received your document for POWER MANUFACTURING, 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 of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L09000006049 "POWER MANUFACTURING, LLC".

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 017A00009219

2017 MAY 16 AM 10:40

TALLAHASSEE, FLORIDA