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(Requestor's Name) W17-166488 (Address)						
<i>(</i> , tu	arcosy					
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
RECEIVE PRINCES						



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COVER LETTER

_	ration Section of Corpor				
SUBJECT:	Hilscher Nor	h America, Inc Name of corp	ooration -	must include suffix	
Dear Sir or Ma	ıdam:	·			
"Certificate of	Existence."	by Foreign Corpora or "Certificate of Go orporation to transac	od Stand	ing" and check are sub	ct Business in Florida." omitted to register the
Please return a Philip Marshall	ll correspon	lence concerning thi	s matter t	o the following:	
		N	ame of P	erson	
Hilscher North	America Inc				
2525 Cabot Driv	ve, Suite 200	Fi	m/Comp	any	
Lisle, IL 60532			Addres	s	
pmarshall@hilse	cher.com	City	/State and	l Zip code	, <u> </u>
		E-mail address: (to b	e used fo	r future annual report i	notification)
For further info	ormation cor	cerning this matter.	please ca	II:	
Philip Marshall		63	0	505-5301	
Name	of Person		ea Code	Daytime Telep	hone 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 c	heck for the	following amount:			
■ \$70.00 Filir	ıg Fee □	\$78.75 Filing Fee & Certificate of State		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy





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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2017

PHILIP MARSHALL HILSCHER NORTH AMERICA, INC. 2525 CABOT DRIVE, SUITE 200 LISLE, IL 60532

SUBJECT: HILSCHER NORTH AMERICA, INC.

Ref. Number: W17000066488

We have received your document for HILSCHER NORTH AMERICA, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are returning the certificate from the State of Illinois. We need only the certificate from the State of Delaware the State of incorporation. You must designate a Florida Registered Agent.

The designation of the registered agent must be at a Florida street address.

The registered agent must sign accepting the designation.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

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

Letter Number: 517A00016578

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

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. Hilscher North America, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Hilscher North America, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) September 9, 2002 (Date of duration, if other than perpetual) (Date of incorporation) August 1, 2017 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2525 Cabot Drive, Suite 200 Lisle, Illinois 60532 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company
1201 Haye Street
Tallahassee , Florida 32301
(City) (Zip code) Office Address:

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.

Holly Jones Assistant Vice President

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: Vice Chairman: Address: Philip Marshall Director: _ 2525 Cabot Drive, Suite 200 Address: _ Lisle, IL 60532 Director: ___ B. OFFICERS President: Vice President: Secretary: Address: _ NOTE: If no essage, you may attach an addendam to the application listing additional officers and/or directors. 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. Philip Marshall



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HILSCHER NORTH AMERICA, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HILSCHER NORTH AMERICA, INC." WAS INCORPORATED ON THE NINTH DAY OF SEPTEMBER, A.D. 2002.

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Authentication: 203016830

Date: 08-07-17

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