

F18000001018

(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:

W18-18947

Office Use Only



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18 FEB 26 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2018 FEB 26 PM 1:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 26, 2018

CORPORATION SERVICE COMPANY - ROXANNE TURNER

SUBJECT: MEESE INC
Ref. Number: W18000018947

We have received your document for MEESE INC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

UNDER DIRECTORS ON PAGE 2 IT SAYS "SEE ATTACHED" AND NO ATTACHMENT WAS INCLUDED,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

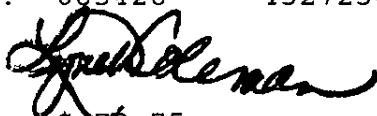
If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 118A00003940

18 FEB 28 AM 10:55
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 085426 4327236
AUTHORIZATION 
COST LIMIT : \$ 78.75

ORDER DATE : February 26, 2018
ORDER TIME : 1:29 PM
ORDER NO. : 085426-005
CUSTOMER NO: 4327236

FOREIGN FILINGS

NAME: MEESE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Meese, 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:

Paul Foreman

Name of Person

Drinker Biddle & Reath LLP

Firm/Company

191 N. Wacker Dr., Suite 3700

Address

Chicago, IL 60606

City/State and Zip code

312-569-1513

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

For further information concerning this matter, please call:

Paul Foreman

at (312) 569-1513

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. Meese, 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. Indiana 3. 35-0506680
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/18/1978 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. 535 N. Midland Ave., Saddle Brook, NJ, 07663
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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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.

By: Roxanne Turner
(Registered agent's signature)

Roxanne Turner
Asst. 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: SEE ATTACHMENT

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John Ryan

Address: 535 N. Midland Ave., Saddle Brook, NJ, 07663

Vice President: _____

Address: _____

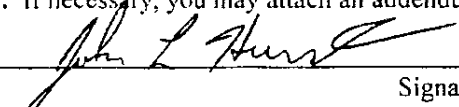
Secretary: John Hurst

Address: 535 N. Midland Ave., Saddle Brook, NJ, 07663

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.

13. John Hurst, Secretary

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MEESE, INC.

Attachment to Florida Application by Foreign Corporation for Authorization to Transact
Business in Florida

Item 11 – Directors

Directors:

William J. Tingué	535 N. Midland Ave., Saddle Brook, NJ, 07663
John Kandravy	535 N. Midland Ave., Saddle Brook, NJ, 07663
David M. Tingué	535 N. Midland Ave., Saddle Brook, NJ, 07663
Kenneth J. Hanau	535 N. Midland Ave., Saddle Brook, NJ, 07663
Paul Grunau	535 N. Midland Ave., Saddle Brook, NJ, 07663

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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

MEESE INC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 18, 1978, and was in existence or authorized to transact business in the State of Indiana on February 26, 2018.

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. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, February 26, 2018

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

197810-491 / 2018542535

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