

AB0000001638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

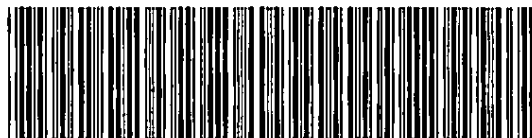
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100311368551

04/06/18--01006--002 **70.00

FILED

2018 APR -6 P 12:05

U.S. DEPT. OF JUSTICE

10/11/18

COVER LETTER

TO: Registration Section
Division of Corporations
Wiley Organics, 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:
Ben Adams

Organic Technologies	Name of Person
<hr/>	
545 Walnut Street	Firm/Company
<hr/>	
Coshocton, OH 43812	Address
<hr/>	
benadams@organictech.com	City/State and Zip code
<hr/>	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Ben Adams	740	622-0755
<hr/>		
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.*

Wiley Organics, Inc.

1. _____
(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)
Ohio 31-1011840

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
06/05/1981

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
3/1/18

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
545 Walnut Street, Coshocton, OH 43812

7. _____
(Principal office address)
PO BOX 640, Coshocton, OH 43812

(Current mailing address, if different)

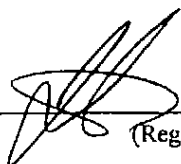
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Jo Frohwerk

Name: _____
13927 Pathfinder Drive

Office Address: _____
Tampa _____, Florida 33625
(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.



(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.

FILED
2010 APR - 6 P 12:05
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF HILLSBORO, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

David Wiley

President: _____

545 Walnut Street, Coshocton, OH 43812

Address: _____

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.

Joshua N. Wiley, VP- Finance & Legal Affairs

13. _____

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

FILED
2010 APR -6 PM 12:05
CLERK OF COURT
COSHOCTON, OH

11B. Additional Officers

Joshua Wiley

Daniel Wiley

Samuel Wiley

Jack Etheridge

Todd Johnson

Paul Wiley

545 Walnut Street, Coshocton, OH 43812

FILED

2010 APR -6 PM 12:05

CLERK OF COURT

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 WILEY ORGANICS, INC., an Ohio corporation, Charter No. 575959, having its principal location in Coshocton, County of Coshocton, was incorporated on June 5, 1981 and is currently in GOOD STANDING upon the records of this office.



2018 APR -6 P 12:05
WITNESSED

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 27th day of February, A.D. 2018.

Jon Husted

Ohio Secretary of State

Validation Number: 201805803418