

5/22/2018

Division of Corporations

F18000002412

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Weir Pump and Valve Solutions, Inc.

Certificate of Status	0
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Estimated Charge	\$78.75

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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. Weir Pump and Valve Solutions, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
2. Michigan
(State or country under the law of which it is incorporated)
3. _____
(FEL number, if applicable)
4. June 9, 2003
(Date of incorporation)
5. _____
(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. 8625 Chant Road, St. Louis, MO 63123
(Principal office address)
c/o Judith Raab, Weir Group PLC, 601 Weir Way, Fort Worth, TX 76103
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

C T Corporation System

By: Mike Jones Mike Jones, Assistant Secretary
(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: William C. Stone; Kristin Reilly

Address: 2701 Stoughton Road, Madison, WI 53716

Director: Grant Ramsden

Address: 8625 Grant Road, St. Louis, MO 63123

B. OFFICERS

President: Grant Ramsden

Address: 8625 Grant Road, St. Louis, MO 63123

Vice President: _____

Address: _____

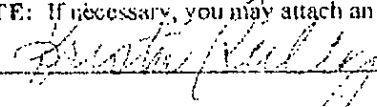
Secretary: Kristin Reilly

Address: 2701 Stoughton Road, Madison, WI 53716

Treasurer: William C. Stone

Address: 2701 Stoughton Road, Madison, WI 53716

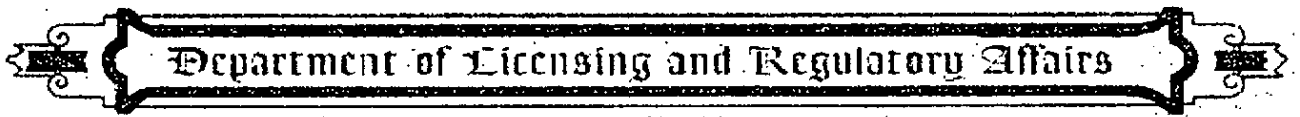
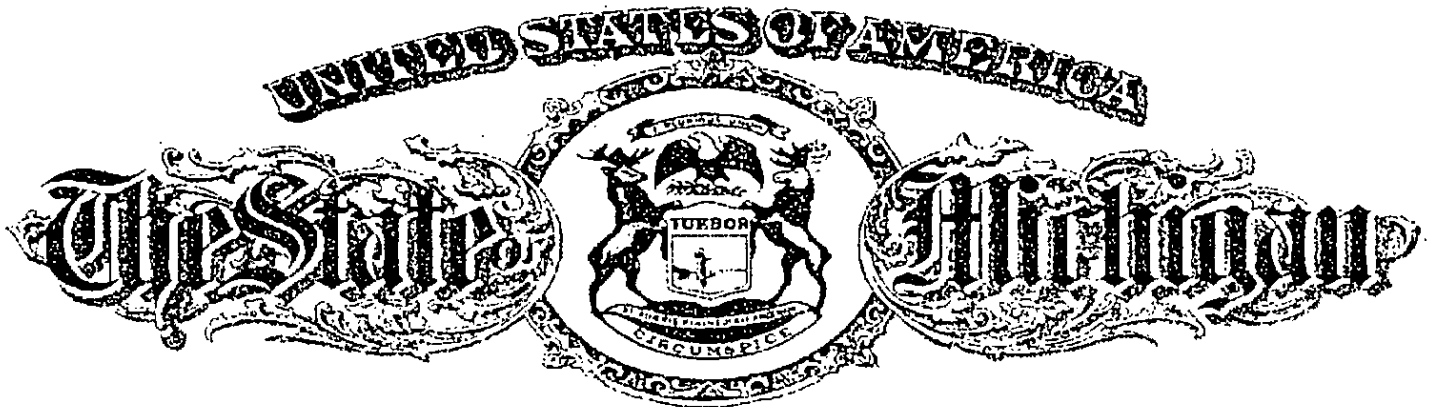
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  Secretary
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. Kristin Reilly, Secretary

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



This is to Certify That

WEIR PUMP AND VALVE SOLUTIONS, INC.

*was validly incorporated on June 9, 2003 as a Michigan DOMESTIC PROFIT CORPORATION,
and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation
is in good standing in Michigan as of this date and is duly authorized to transact business and for no other
purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.*



Sent by electronic transmission

Certificate Number: 18055229880

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 15th day of May, 2018.*

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau