F180000000856

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Doomsoo Zimiy Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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BECRETARY OF STATE

O SIMMONS JUN 1 9 2018

COVER LETTER

•	gistration Section vision of Corporations			
SUBJECT	r: Phoenix Trinity Manuf	acturing, Inc.		
			must include suffix	
Dear Sir or	Madam:			
"Certificate	ed "Application by Foreign Co e of Existence," or "Certificate renced foreign corporation to tr	of Good Stand	ing" and check are sub	
Please retur	rn all correspondence concerni	ng this matter t	o the following:	
Tiffany W	'illiams			
		Name of P	erson	
Phoenix T	Frinity Manufacturing, Inc			
		Firm/Comp	any	_
10620 <u>H</u> ai	rris Loop			
		Addres	s	
_ Hudson .	FL 34667			
		City/State and	d Zip code	
twilliams	@ptrinity.com	// to h	- franco	
	E-mail address	(to be used to	r future annual report n	iotification)
For further	information concerning this m	atter, please ca	II:	
Tiffany W	/illiams	at (937	270-8692	
	ame of Person	Area Code	Daytime Telepl	none Number
Reg Div Cli 266	REET/COURIER ADDRESS gistration Section vision of Corporations fron Building 61 Executive Center Circle llahassee, FL 32301	3 :	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Enclosed is	a check for the following amo	unt:		
□ \$70.00	Filing Fee		\$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.

	Manufacturing Co.		
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
Ohio	3.	45-2642192	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
September 23	, 2011 5.		
(Date of incorporation)		(Date of duration, if other than perpetual)	
	······································		
		in Florida, if prior to registration) 502, F.S., to determine penalty liability	
10620 Harria I		PEG . T	
10620 Harris L	oop, Hudson, FL 34667(Princi	pal office address)	
	•	SA TO IN	
	(Current maili	ng address, if different)	
		ng address, if different) O. Box NOT acceptable)	
Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Brick Business Law, PA		
Name:	Brick Business Law, PA 100 S Ashley Drive, Suite 620	_	
	100 S Ashley Drive, Suite 620	, Florida 33602	
fice Address:	100 S Ashley Drive, Suite 620 Tampa (City)	, riorida	
fice Address: Registered age	Tampa (City) ent's acceptance:	(Zip code)	
fice Address: Registered agenving been namesignated in this	Tampa (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint.	(Zip code) ice of process for the above stated corporation at the ploment as registered agent and agree to act in this capacit	
Tice Address: Registered agenting been names signated in this rether agree to continue to	Tampa (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint.	(Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacity relative to the proper and complete performance of my	
Tice Address: Registered age aving been nam signated in this rther agree to c	Tampa (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoints omply with the provisions of all statutes.	(Zip code) ice of process for the above stated corporation at the ploment as registered agent and agree to act in this capacit relative to the proper and complete performance of my of my position as registered agent.	

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: __ Brian Williams Director: Address: _10620 Harris Loop Hudson, FL 34677 Director: Tiffany Williams 10620 Harris Loop Address: Hudson, FL 34677 **B. OFFICERS** President: Brian Williams Address: 10620 Harris Loop Hudson, FL 34667 Vice President: Secretary: Tiffany Williams Address: 10620 Harris Loop, Hudson, FL 34677 Treasurer: Tiffany Williams Address: 10620 Harris Loop, Hudson, FL 34677 NOTE: If necessary you may attach an addendum 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. Brien Williams 13. _

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 PHOENIX TRINITY MANUFACTURING INC., an Ohio corporation, Charter No. 2064028, having its principal location in Dayton, County of Montgomery, was incorporated on November 23, 2011 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 14th day of June, A.D. 2018.

Ohio Secretary of State

Jon Hastel

Validation Number: 201816501798