## 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

: (514)280-3338 : (954)208-0845 Fax Number

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

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## FOREIGN PROFIT/NONPROFIT CORPORATION

Temsa North America, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

(2)

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## **FAX COVER SHEET**

TO		
COMPANY		
FAX NUMBER	18506176383	
FROM	Kimberly Laughrey	
DATE	2018-08-03 14:03:13 CST	
RE	Temsa North America, Inc.	

#### COVER MESSAGE

Thank You,

Nicole Diffenbaugh Senior Fulfillment Specialist CT Corporation

Team (614) 280-3338 GlobalFuffillmentTeam@wolterskluwer.com



1209 N Orange Street Wilmington, DE 19801 www.wolterskluwer.com

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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. TEMSA NORTH AMERICA, 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). 83-1118821 (FEI number, if applicable) (State or country under the law of which it is incorporated) JUNE 29, 2018 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Piantation 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. CT Corporation System Nuthan Gittin, 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	i business addresses of officers and/or directors:				
A. DIRECTO	ors —				
Chairman:					
Address:		<del></del>			<del></del>
,					
Director:	HASAN YILDIRIM				
Address:	4501 N ACCESS RD. CHATTANOOGA, TN 37415-3816				
				·	
Director:	URAL INAL			·	<del></del>
Address:	4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816				· · · · · · .
Director	HAKAN KIRALP				
	4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816	•			··· <del>-</del>
				<del></del>	
B. OFFICER President:	JAMES THOMAS DEL PIANO				
	4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816	·	· · · · · ·	<u> </u>	<del></del>
				<u> </u>	·
Vice President:					1
		· · · · · · · · · · · · · · · · · · ·	 		<u> </u>
, <del></del>		· · · · · · · · · · · · · · · · · · ·	 	<b>₹</b> (3)	
Secretary:	HASAN ONGEL	•	<u> </u>	_ <u></u>	<del></del>
Address:	4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816			<u>ت</u> 	<del> </del>
Treasurer:	HASAN ONGEL		· · · -		<del></del>
	4501 N ACCESS RD, CHATTANOOGA, TN 37415-3816			·	
	cessary, you may attach an addendurate the application listing additional	officers and/	or dire	ctors.	
12. JAME	Thems Dalina Officer of Director or Officer	N ONGEL	- //_		· ·
are true and th	director signing this downment (and who is listed in number 11 above) at that he or she is aware that false information submitted in a document to the felony as provided for in s.817.155, F.S.	firms that the ic Departmen	facts) t of Su	stated h ue cons	erein titetes
13. James T	homas Del Piano, President Flasan (Typed or printed name and capacity of person signing applica	Ongel, Secreta ition)	ry and	Treasur	er



# Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

CT CORPORATION 2390 E CAMELBACK ROAD PHOENIX, AZ 85016

August 2, 2018

Request Type: Certificate of Existence/Authorization

Request #:

0284905

Issuance Date: 08/02/2018

Filing Fee:

Copies Requested:

Document Receipt

Receipt #: 004223179

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3736689569

\$20.00

Regarding:

Temsa North America, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 06/29/2018

Status:

Active

Duration Term:

Business County: HAMILTON COUNTY

Perpetual

Control #:

971895

Date Formed:

06/29/2018

Formation Locale: TENNESSEE

Inactive Date:

### CERTIFICATE OF EXISTENCE

I. Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Temsa North America, Inc.

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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