F19000002904

(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:				
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SECRETARY OF STATE
SECRETARY O

B McKNIGHT

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Pro-Tel Diese R Name of corporation - m		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in	g" and check are submitted to register the	
Please return all correspondence concerning this matter to t	the following:	
Dean Skinner		
Name of Pers	on	
- Pro-Tex Diese		
Firm/Company 2016ENKINCIN	y	
Address		
Lexinaton Sc 29	072	
City/State and Z	▲	
Proteka w foods + &	duture innual report notification)	
For further information concerning this matter, please call:		
Dean Skinner at (803) Name of Person Area Code	542 - 2006 Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Transport of the second of the
and the second s	8.75 Filing Fee & Sertified Copy Sertified Copy Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA STA REIGN CORPORATION TO TRANSACT BU			
(Enter name of c	TOP DIESEL REPORTS Corporation; must include "INCORPORATED," " Corp.," "Inc.," "Co.," or "Corp.")			
(If name unavails	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting bu	siness in Florida)	
	h Carolina 3.		<u></u>	
•	y under the law of which it is incorporated)	(FEI number, if applica		
4. 05- (Date	-14 - 20 19 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	(Date of duration, if other than	perpetual)	
6			··	
	(Date first transacted business in Fl (SEE SECTIONS 607,1501 & 607,1502			
7. 261 G	ilenkirk Ln. Lexing	ton, Sc 29092		
	(Principat	office address)		
	(Current mailing a	address, if different)		
8. Name and street	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	ZOLO MAY	
Name:	Ed Skinner		Y -6 TARY ASSI	701.7 7
Office Address:	9017 Parkhill Rd.		PH PH	ياسم آ معيج
	Tallahassee		OPINO DAILE	
0 B	(City)	(Zip code)		
designated in this further agree to co	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all stalutes relationships with and accept the abbigations of n	nt as registered agent and agree to tive to the proper and complete p	o act in this capacity	
	Registered age		kinnev	
10. Attached is a c	rertificate of existence duly authenticated, no		ry of this applicatio	on 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: Dean SKINNEN			
Address: 26 Glenkirk Ln			
Address: 26 Glenkirk Ln Lexington, SC 29072			
Vice Chairman:			
Address:			
Director:			
Address:			
Director:	-		
Address:			
B. OFFICERS			
President: Dean Skinner			
Address: 261 Glenkyrkyn.	J. U.	2019	
Lexington, Sc 29072	27	MAY	" i'
Vice President:	ARY	9)
	74C	P H	17.76
Address:	- CE	·t.	
	*7		
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o			
12. Signature of Director or Officer			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the	facts st	ated he	rein
are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.			
13. Dean Skinner - President			
(Typed or printed name and capacity of person signing application)			

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Pro-Tek Diesel Repair, Inc., a corporation duly organized under the laws of the State of South Carolina on March 14th, 2019, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

2019 MAY -6 PH 4: 4

SECHETARY OF STATE

TALLAMASSEF, FLORIE

Given under my Hand and the Geat Seal of the State of South Carolina this 14th day of March, 2019.

Mark Hammond, Secretary of State