

FP19000003628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

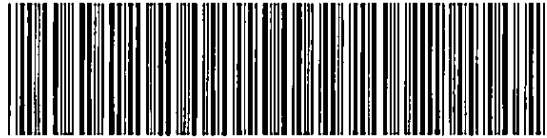
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Z BROWN  
AUG 08 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 873904 3776A  
AUTHORIZATION :   
COST LIMIT : \$ 125.00

ORDER DATE : August 7, 2019  
ORDER TIME : 2:0 PM  
ORDER NO. : 873904-010  
CUSTOMER NO: 3776A

FOREIGN FILINGS

NAME: WINSUPPLY WEST ORANGE FL CO.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62969

EXAMINER: \_\_\_\_\_

**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.*

Winsupply West Orange FL Co.

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)  
Delaware 84-2585374

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
08/07/19

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (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)

c/o WGS - Compliance Services 3110 Kettering Blvd Moraine OH 45439-1924

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

FILED  
CORPORATION  
DIVISION  
TALLAHASSEE  
FLORIDA

**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.*

Corporation Service Company  
By: Roxanne Turner  
(Registered agent's signature) Roxanne Turner  
Asst. Vice President

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**

Scott N. Karlson

Chairman: \_\_\_\_\_

540 Logistics Ln Bldg 100 Ocoee FL 34761

Address: \_\_\_\_\_

D. Michael Larkin

Vice Chairman: \_\_\_\_\_

3110 Kettering Blvd Moraine OH 45439-1924

Address: \_\_\_\_\_

Robert W. Ferguson

Director: \_\_\_\_\_

3110 Kettering Blvd Moraine OH 45439-1924

Address: \_\_\_\_\_

Steven E. Lyon

Director: \_\_\_\_\_

1969 W New Hampshire St Orlando FL 32804-6011

Address: \_\_\_\_\_

**B. OFFICERS**

Scott N. Karlson

President: \_\_\_\_\_

540 Logistics Ln Bldg 100 Ocoee FL 34761

Address: \_\_\_\_\_

D. Michael Larkin

Vice President: \_\_\_\_\_

3110 Kettering Blvd Moraine OH 45439-1924

Address: \_\_\_\_\_

Michael S. Kirkland

Secretary: \_\_\_\_\_

3110 Kettering Blvd Moraine OH 45439-1924

Address: \_\_\_\_\_

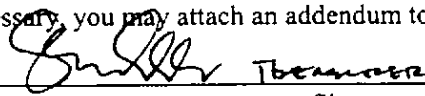
Sean W. Culler

Treasurer: \_\_\_\_\_

3110 Kettering Blvd Moraine OH 45439-1924

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.

Sean W. Culler, Treasurer

13. \_\_\_\_\_

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

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA  
**WINSUPPLY WEST ORANGE FL CO.**  
SUPPLEMENTAL INFORMATION – ADDITIONAL DIRECTORS

Directors:

Darren L. Mobley	1969 W New Hampshire St Orlando FL 32804-6011
John N. Finotti	1969 W New Hampshire St Orlando FL 32804-6011

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# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WINSUPPLY WEST ORANGE FL CO." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WINSUPPLY WEST ORANGE FL CO." WAS INCORPORATED ON THE SEVENTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



7551411 8300

SR# 20196390807

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203367102

Date: 08-07-19