Faccomids

| (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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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 189122 7503837

AUTHORIZATION /:

COST LIMIT

ORDER DATE : February 21, 2020

ORDER TIME : 2:09 PM

ORDER NO. : 189122-005

CUSTOMER NO: 7503837

FOREIGN FILINGS

NAME: M & R PRINTING EQUIPMENT, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

COVER LETTER

| TO: Regist Divisi | tration Section ion of Corporations | | | | | | | |
|---------------------------------|---|----------------------|----------|--|------------------------|---------------------------------------|---------------|------|
| SUBJECT: | M&R Printing Equipm | ent, Inc. | | | | | | |
| JODULE I. | Name of corporation - must include suffix | | | | | | | - |
| Dear Sir or M | ladam: | | | | | | | |
| "Certificate of | "Application by Forei f Existence," or "Certi ced foreign corporation | ficate of Good Stan | ding" a | nd check are subn | t Busines nitted to | ss in Flor register | ida,'' the | |
| Please return : | all correspondence cor | ncerning this matter | to the | following: | | -t P:S | 101 | |
| Douglas Gracs | ssle | | | | | LO. | 130 | Ti |
| | | Name of | Person | | | 五五 | EB 24 | |
| M&R Printing | Equipment, Inc | | | | | SS(| | - 55 |
| | | Firm/Con | ıpany | | | mon | PH 4: 4.7 | Ċ |
| 440 Medinah F | Road | | | | | 0: | F. | _ |
| | <u> </u> | Addr | ess | | | 316 | 7 - | _ |
| Roselle, Illinoi | is 60172 | | | | | <i>V</i> | | |
| | | City/State a | nd Zip | code | _ | | | _ |
| doug.graessle@ | | _ | _ | | | | | _ |
| | E-mail a | ddress: (to be used | for futu | re annual report n | otificatio | n) | | |
| For further in | formation concerning | this matter, please | call: | | | | | |
| Doug Graessle | 2 | at (| 446 | 5-7103 | | | _ | |
| Nam | e of Person | Area Coo | le | Daytime Teleph | one Nur | nber | | |
| Regis Divis The C 2415 | EET/COURIER ADI stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Sui hassee, FL 32303 | | | MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F | ection orporation | ns | | |
| Enclosed is a Please make ch | 0 | DA DEPARTMEN | □ \$78.7 | ATE S Filing Fee & Ged Copy | Ce | 7.50 Fili ertificate ertified C | of Statu | s & |

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. M & R Printing | · · | N" "COMPANY" "COUDOD ATION" | |
|--------------------|---|--|------------|
| | orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.") |), COMPANT, CORPORATION, | |
| | | Control (Control (Con | |
| (If name unavaila | able in Florida, enter alternate corporate nam | ne adopted for the purpose of transacting business in Florida) | |
| 2. Delaware | 3 | 36-3924258 | |
| (State or country | y under the law of which it is incorporated) | (FEI number, if applicable) | |
| 4. 12/15/1993 | | 5 | |
| | of incorporation) | (Date of duration, if other than perpetual) | |
| 6. Upon Filing | | 20 FC | 7 |
| | (SEE SECTIONS 607.1501 & 607 | s in Florida, if prior to registration) 1502, F.S., to determine penalty liability) | |
| 440 Medinah Rd | Roselle, II. 60172-2329 | SSE - | 77 |
| /· | (Principal o | office street address) | \bigcirc |
| | | LOST F. | |
| | (Current mai | ling address, if different) | |
| | | P | |
| 8. Name and stree | et address of Florida registered agent: (F | P.O. Box NOT acceptable) | |
| Name: | Corporation Service Company | | |
| Office Address: | 1201 Hays Street | | |
| Office Address. | Tallahassee | Florida 32301 | |
| | (City) | , Florida 32301 (Zip code) | |
| | | | |
| 9. Registered ag | ent's acceptance: | rvice of process for the above stated corporation at the pla | ice |
| designated in this | application. I hereby accept the appoin | ntment as registered agent and agree to act in this capacity | y. I |
| further agree to c | omply with the provisions of all statute. | s relative to the proper and complete performance of my d | tuties |
| and I am familiai | with and accept the obligations of my | Kadesha Roberson | |
| C | Corporation Service Company | isst. Vice President | |
| F | wordelw tick | neles | |
| | (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.

| A. DIRECTORS | | | | | | |
|---|------------------------|-----------------|---------------------------|--|--|--|
| □Chairman | Name: Peter Van Raalte | □ Chairman | Gerson Guzman | | | |
| □Vice Chairman | Address: | □ Vice Chairman | Address: 440 Medinah Road | | | |
| Director | Medord, NY 11763 | Director | Roselle, IL 60172 | | | |
| President | | □President | | | | |
| □Vice President | | □Vice President | | | | |
| ☐ Secretary | ☐Treasurer | ■ Secretary | ☐ Treasurer | | | |
| □Other | Other | □Other | □Other | | | |
| □Chairman | Name: | □ Chairman | Name: | | | |
| □ Vice Chairman | 440 Medinah Road | □Vice Chairman | 266 Middle Island Road | | | |
| □Director | Roselle, IL 60172 | Director | Medford, NY 11763 | | | |
| □President | | □President | EB 24 AHASSI | | | |
| □Vice President | | □Vice President | SEE TO | | | |
| Secretary | ■ Treasurer | Secretary | Treasurer - | | | |
| □Other | Other | □Other | | | | |
| | | | | | | |
| Chairman | Name: | □ Chairman | Name: | | | |
| □Vice Chairman | Address: | □Vice Chairman | Address: | | | |
| □Director | | □Director | | | | |
| □President | | □President | | | | |
| □Vice President | | □Vice President | | | | |
| □Secretary | Treasurer | ☐ Secretary | Treasurer | | | |
| □Other | | Other | Other | | | |
| Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. | | | | | | |
| 12. Varylar A Druck 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. Doug Graessle , CFO

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

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "M & R PRINTING EQUIPMENT, INC." 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 TWENTY-FIRST DAY OF

FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE
BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M & R PRINTING EQUIPMENT, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF DECEMBER, A.D. 1993.

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

THE TENTE OF THE T

Authentication: 202437151

Date: 02-21-20