

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sidock Group, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jill Bolde

Name of Person

Parmenter Law

Firm/Company

601 Terrace Street

Address

Muskegon, Michigan 49440

City/State and Zip code

Jill@parmenterlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher L. Kelly

at (231) 722-5414

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

2020 MAR 27 11:15

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. Sidock Group, 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)

2. Michigan _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 8, 2000 _____ 5. perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon approval _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 45650 Grand River Ave., Novi, Michigan 48374

(Principal office street address)

(Current mailing address, if different)

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

Name: Kimberley Stamper _____

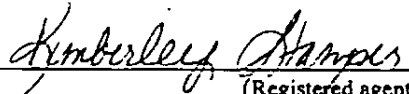
Office Address: 3001 North Rocky Point Dr., East, Suite 200 _____

Tampa _____, Florida 33607
(City) (Zip code)

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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.



(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: William Sidock
 Vice Chairman Address: 45650 Grand River Ave.
 Director Novi, Michigan 48374
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Steven P. Dehorn, P.E.
 Vice Chairman Address: 45650 Grand River Ave.
 Director Novi, Michigan 48374
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

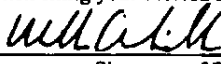
Chairman Name: Donald G. Hipshier, P.E.
 Vice Chairman Address: 45650 Grand River Ave.
 Director Novi, Michigan 48374
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Kevin J. Hirzel, P.E.
 Vice Chairman Address: 45650 Grand River Ave.
 Director Novi, Michigan 48374
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Christopher L. Kelly
 Vice Chairman Address: 601 Terrace Street
 Director Muskegon, Michigan 49440
 President _____
 Vice President _____
 Secretary Treasurer
 Other Authorized Agent Other _____

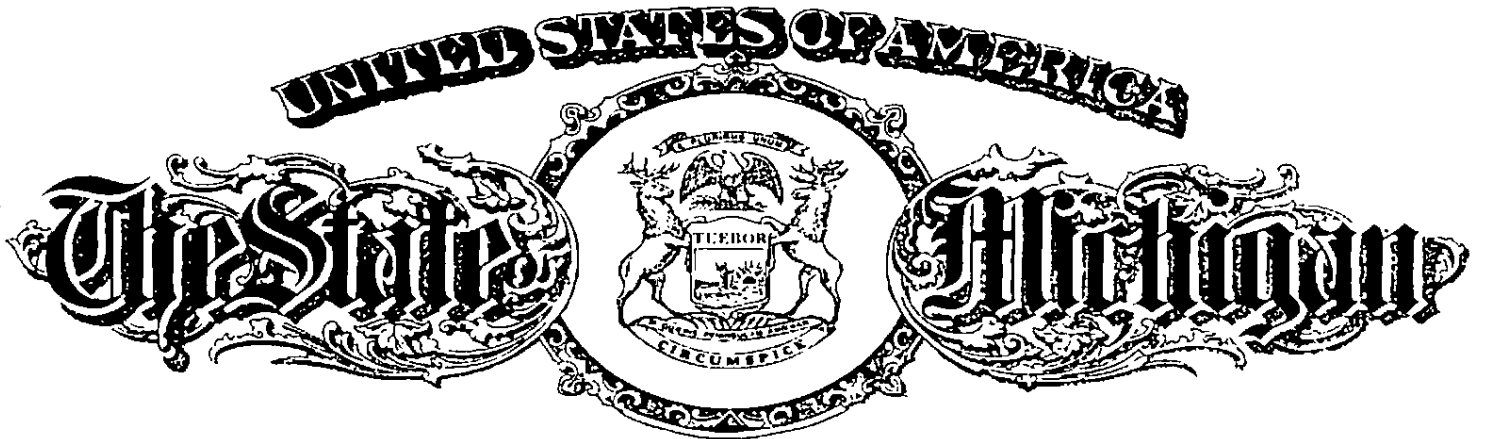
Chairman Name: Michael P. Newkirk, P.E.
 Vice Chairman Address: 45650 Grand River Ave.
 Director Novi, Michigan 48374
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

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. 
 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. William Sidock, President
 (Typed or printed name and capacity of person signing application)



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

SIDOCK GROUP, INC.

was validly incorporated on February 8, 2000 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

2020 APR 27 11:16

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 21st day of April, 2020.

Linda Clegg

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 20040313560