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	FOREIGN PROFIT/NONPROFIT CORPORATION S&S Training Acquisition Corp.		
	Certificate of Status	0	
	Certified Copy	1	
	Page Count	04	
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2020-06-11 12:57:27 EDT



## 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.

S&S Training Acquisition Corp.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co." or "Corp.")

(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the p	urpose of transacting business in Florida				
Delaware	3	281-60-2105					
(State or country	3 under the law of which it is incorporated)	**************************************	(FEI number, if applicable)				
May 19, 2020	5						
(Date of incorporation)		(Date (	te of duration, if other than perpetual)				
•							
	to registration) mine penalty liability)						
	Drive, Chagrin Falls, Ohio 44023						
	(Principal office address)						
	(Current mail	ing address, if diff	Perent)				
. Name and stree	Laddress of Florida registered agent: (P	.O. Box <u>NOT</u> ac	cceptable)				
Name:	C T Corporation System						
Office Address:	1200 South Pine Island Road						
	Plantation,	Florida	33324 Florida				
	(City)		(Zip code)				

#### 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, 1 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 1 am familiar with and accept the obligations of my position as registered agent.



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.

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1. Nam	es and business addresses of officers and/or directors:
A. DIRE	CTORS
Ibairman:	Theodore VV. Frank
Address:	9925 Nighthawk Drive, Chagrin Falls, Ohio 44023
	rman:
Director	
Address:	
Director:	
Address:	
	· ·
B. OFF	
) Prani danti	Frank Swiger
	9525 Nighthawk Drive, Chagrin Falls, Ohio 44023
Vddress;	
Vice Pres	ident:
Address:	
•	
Secretary	Theodore W. Frank
Address;	9525 Nighthawk Drive, Chagrin Falls, Ohio 44023
Freasurer	
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.	Signature of Director or Officer
are true	cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155, F.S.
	odore W. Frank, Chairman of the Board and Secretary
3. <u> </u>	(Typed or printed name and capacity of person signing application)

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Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "S&S TRAINING ACQUISITION CORP." 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 TENTH DAY OF JUNE, A.D. 2020.

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



Bullack, Secretary of Sists ffray W

Authentication: 203080546 Date: 06-10-20

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