# F20000028H

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### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: TKL Products Corp.			
30b0.c1.	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by For "Certificate of Existence," or "Ce above referenced foreign corporate	rtificate of Good Stand	ling" and check are subm	
Please return all correspondence of	concerning this matter	to the following:	
Thomas D. Dougherty, President			
	Name of P	erson	
TKL Products Corp.			
	Firm/Comp	pany	
2545 Turkey Creek Road			
	Addres	SS	
Oilville, Virginia 23129			•
<del></del> -	City/State an	d Zip code	) (S)
tomd@tlk.com			-
E-mail	address: (to be used for	or future annual report no	otification)
For further information concerning	ig this matter, please ca	ill:	2:
George Shepherd	804 at (	330-5528, ext. 222	
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURIER AI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303	e	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
<del>-</del>	RIDA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status &

## 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.

TKL Products C	Согр.			
	orporation; must include "INCORPORATED, orp." "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATION."		
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	siness in Florida)	
2. Virginia 3. (State or country under the law of which it is incorporated)		54-1579613		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. 1/14/1991	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6				
	(Date first transacted business i	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7. 2545 Turkey Cree	ek Road			
	(Principal off	ice <u>street</u> address)		
Oilville, Virginia				
	(Current maili	ng address, if different)		
8. Name and stree	et address of Florida registered agent: (P.G	O. Box <u>NOT</u> acceptable)		
Name:	InCorp Services. Inc.	<del></del>	>	
Office Address:	17888 67th Court North		, . )	
	Loxahatchee	Florida <u>33470</u>	·.	
	(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, 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.

Amber Ragland on behalf of InCorp Services, Inc.
(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: Thomas D. Doughery	□Chairman Name:		
□Vice Chairman	Address: P.O. Box 215	□Vice Chairman	man Address: P.O. Box 215 Oilville, VA 23219	
Director	Oilville, VA 23219	Director		
President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	Secretary		□Treasurer
□Other	□Other	□Other	<del>_</del> _	□Other
□Chairman	Name;	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	<del></del>
□Director		□Director		<u> </u>
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer ; ; ;
Other	Other	Other		Other
□Chairman	Name:	□Chairman	Name:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Address:			•
Director	Address:	□ Director		·
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□Other	□Other	<del>_</del>	□Other
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department of Director or Signature of Director or	nt of State Annual Re	port form.	•
The officer or direc	ctor signing this document (and who is listed in number also information submitted in a document to the Departn	II above) affirms the	at the facts stated	herein are true and that he or
13. Donna M. De	ougherty, Director/Secretary			

# Common brealth of Hirginia



# State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That TKL Products Corp. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on January 14, 1991;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

June 16, 2020

your theck

Joel H. Peck, Clerk of the Commission

CERTIFICATE NUMBER: 2020061614580366