Division of Corporations

(Totil AD Experture Constitution of Corporations)

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(Individual Constitution of Corporations)

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| | Doing so will generate another cover sheet. | E E |
|-------|---|----------|
| Ta: | | 53 L |
| | Division of Corporations | 9 |
| | Fax Number : (850)617-6383 | 13 - P |
| From: | | <u> </u> |
| | Account Name : C T CORPORATION SYSTEM | |
| | Account Number : FCA000000023 | |
| | Phone : (614)280-3338 | ン |
| | Fax Number : (954)208-0845 | |

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

0 NOV - 9 PM 1:3

FOREIGN PROFIT/NONPROFIT CORPORATION TYKMA, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

Electronic Filing Menu

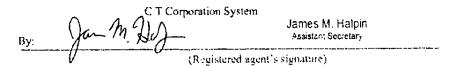
Corporate Filing Menu

Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT RUSINESS IN FLORIDA

| (Enter name of or | progration; quist include "INCORPORA FED | ," "COMPANY," "CORPORATION," | | |
|---------------------------------------|---|---|----------------|-------------|
| "Inc.," "Co.," "C | orp." "Inc," "Co," or "Corp.") | | | |
| | ible in Florida, enter alternate corporate name | | isiness in Flo | orida) |
| Ohio | 2 | 31-1753998 | | |
| (State of country | y under the law of which it is incorporated) 1 | (FEI number, if applied | able) | ນ ວ ນ |
| | of incorporation) | | perpetual) | |
| • | (SEE SECTIONS 607.1501 & 607. ve, Chillicothe, Ohio 45601 | in Florida, if prior to registration) 1502, F.S., to determine penalty liability) | | PM 4: |
| P.O. Box 917, Chillicothe, Ohio 45601 | | | E A | F |
| | (Current mail | ing address, if different) | | |
| 3. Name and stree | nt address of Florida registered agent. (P | .O. Box NOT acceptable) | | |
| Name: | C T Corporation System | gar Antonipus primi | | |
| Office Address: | 1200 South Pine Island Road | · · · · · · · | | |
| | Plantation, | 33324 | | |
| | 1 iditation | . Florida | | |

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.



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 Paul R. Dupce | | | |
| Chairman: 315 E New England Ave, Unit 25 | | ****** | |
| Address: Winter Park, FL 32789 | | | |
| G. Mitchell Kraspy | | - | |
| Vice Chairman: 221 Loggerhead Drive | | | |
| Address: Melbourne Beach, FL 32951 | | | |
| Karen Cyrus | | | |
| Director: 370 Gateway Drive | | ·· | |
| Address: Chillicothe, Ohio 45601 | я-! :2-:- | ~ | |
| | <u> </u> | 2820 N | |
| Director: | £., | ₹ | |
| Address: | β7 . 241 · | . | <u> </u> |
| | - | P | : 1 |
| B. OFFICERS | ₫.) - 20: - | Ξ. | امین ا |
| President | ラデン | ŧ. | |
| President: 315 E New England Ave, Unit 25 | | | • |
| Address. Winter Park, FL 32789 | | | |
| | | | |
| Vice President: | | | , |
| Address: | | | · |
| G. Mitchell Krusny | | | |
| Secretary: 221 Loggerhead Drive, Melbourne Beach, FL 32951 | | | |
| Address: Karen Cyrus | | | |
| ar. | | | |
| 370 Gateway Drive, Chillicothe, Ohio 45601 Address: | _ , | ··- | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers a | ind/or dir | ectors. | |
| 12. Signature of Director or Officer | | ··· | |
| The officer or director signing this document (and who is listed in number 11 above) affirms that are true and that he or she is aware that false information submitted in a document to the Departmanth a third degree felony as provided for in s.817.153, F.S. Paul R. Dupee, President | | | |
| 13. (Typed or printed name and capacity of person signing application) | _ , | | |

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show TYKMA, INC., an Ohio corporation, Charter No. 1205160, having its principal location in Chillicothe, County of Ross, was incorporated on January 18 2001 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of November, A.D. 2020.

Ohio Secretary of State

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Validation Number: 202031403476