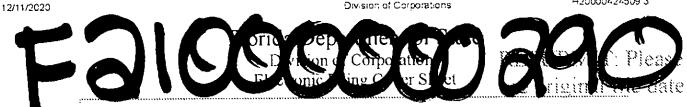
Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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

Email	Address:		

FOREIGN PROFIT/NONPROFIT CORPORATION SHIFFLER EQUIPMENT SALES, INC.

Certificate of Status	0
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December 10, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

CORPORATION SERVICE COMPANY

SUBJECT: SHIFFLER EQUIPMENT SALES, INC.

REF: W20000140450

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

Please complete the coversheet and also title for John W Shiffer is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

FAX Aud. #: H20000420954 Letter Number: 920A00024862

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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.

	able in Florida, enter alternate corporate name ac				
Ohio	(FEI number, if applie				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applie	able)		
08/26/1975		5. (Date of duration, if other than perpetual)			
(Date	of incorporation)	(Date of duration, if other than perpetual)			
					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		20 T		
745 South St, Ch	ardon, OH 44024		7-27		
	(Principal offic	c <u>street</u> address)	Syll 10		
PO Box 232, Ch	ardon, OH 44024				
	(Current mailing	address, if different)	PM 4: 17		
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	IT IT		
	Corporation Service Company	. ,			
Name:	1201 Hays Street	<u> </u>			
ffice Address:					
	(City)	Florida 32301 (Zip code)			

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.

(Registered agent's signature)

H20000424509.3

A. DIRECTORS				-25000024003	
□Chairman	Name. Mark C Lewis	□Chairman	Name:	W Shiffler	
□Vice Chairman	745 South St		Address:		
 □Director	Chardon, OH 44024	Director	Chardon, O	H 44024	
President		□President			
□Vice President		□Vice President			
Secretary	□Treasurer	Secretary		Treasurer	
□Other	Other	□Other		□Other	
□Chairman	Name:	□Chauman	Name.		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director	Chardon, OH 44024	Director		20 D	
□President		□President		C	
□Vice President		□Vice President		:: Fried	
□ Secretary	☐Treasurer	☐ Secretary		Discussive.	
Other	Other	□Other		口分配 _ 	
□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 individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature of Direct Control of Control of Direct Control of	ertment of State Annual Re	d for reporting	purposes only. Non-indexed	

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.

Mark C Lewis, President

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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 SHIFFLER EQUIPMENT SALES, INC., an Ohio corporation, Charles No. 470666, having its principal location in Chardon, County of George was incorporated on August 26, 1975 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 December, A.D. 2020.

Ohio Secretary of State

L. J. Com

Validation Number: 202034401782