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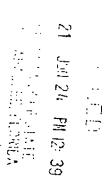
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Certified Copies		Cerl	tificates	of Status	s
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## **COVER LETTER**

_	tration Section ion of Corporati	ons			•
	•	trial Services, Inc			
SOBJECT.		Name of co	orporation -	must include suffix	<del></del>
Dear Sir or M	(adam:				
"Certificate o	f Existence," or		Good Standi	ing" and check are sub	et Business in Florida." mitted to register the
Please return	all corresponder	nce concerning t	his matter t	o the following:	
Entity Managr	ment Admin				
<del></del>			Name of P	erson	
Pro Kleen Indo	ustrial Services, I	ic.			
			Firm/Comp	any	
9711 Lancaste	r Rd				
			Addres	S	
Hebron, OH 4	3025-9764				
	<del>_</del>	Ci	ty/State and	I Zip code	
legal@mpwse	rvices.com				
	E-	mail address: (to	be used fo	r future annual report r	notification)
For further in	formation conce	rning this matte	r, please ca	11:	
Caitlyn Solida	У	at (	740	) 928-0213 Daytime Telep	
Nam	e of Person		Area Code	Daytime Telep	hone Number
Regis Divis The C 2415	EET/COURIED stration Section ion of Corporat Centre of Tallah N. Monroe Stre hassee, FL 323	ons assee et. Suite 810		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclosed is a Please make ch \$70.00 Fil	ieck payable to: F	llowing amount LORIDA DEPA \$78.75 Filing Fe Certificate of St	RTMENT (	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status of

## 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.

(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transac	ting business in Florida)
Ohio	ountry under the law of which it is incorporated)  3.  (FEI number, if applicable)		
(State or countr	ry under the law of which it is incorporated)	(FEI number, if	applicable)
02/18/1994	5		
			er than perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liab	pility)
9711 Lancaster F	Rd, Hebron, OH 430225-9764		
	(Principal office	street address)	
	(Current mailing a	ddress, if different)	· 21
Name and stre	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	
Name:	Corporation Service Company		JUN 24 PM 12:
	1201 Hays Street	_	
fice Address:	Tallahassee	— Florida 32301	ED PM 12: 39 PF STATE ELECTION
	(City)	(Zip code)	9

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

under the law of which it is incorporated.

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

A. DIRECTORS	•		
□Chairman	Name: Adam Black	□Chairman	Name: Jared Black
□Vice Chairman	Address: 9711 Lancaster Rd	□Vice Chairman	Address: 9711 Lancaster Rd
☑Director	Hebron, OH 43025-9764	☑Director	Hebron, OH 43025-9764
<b>⊠</b> President		□President	
□Vice President		₩Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	□Other	Other
□Chairman	Name: Kristen Black	□Chairman	Name: Sarah Pemberton
□Vice Chairman	Address: 9711 Lancaster Rd	□Vice Chairman	Address: 9711 Lancaster Rd
☑Director	Hebron, OH 43025-9764	□Director	Hebron, OH 43025-9764
□President		□President	
		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	<b>√</b> Treasurer
□Other	Other	□Other	Other
□Chairman	Name: _Catherine Jopling	□Chairman	Name: Michael Ponzani
□Vice Chairman	Address: 9711 Lancaster Rd	□Vice Chairman	Address: 9711 Lancaster Rd
□Director	Hebron, OH 43025-9764	□Director	Hebron, OH 43025-9764
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	☐Other <u>Assistan</u>	t Secretary □Other
	Use an attachment to report more than six (6). The added to the index when filing your Florida Department	rtment of State Annual Re	
	Signature of Direct	tor or Officer	
	ctor signing this document (and who is listed in nuralse information submitted in a document to the De		
13	Catherine Jopling, Secr	etary	

## 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 PRO KLEEN INDUSTRIAL SERVICES, INC., an Ohio corporation, Charter No. 864699, having its principal location in Lancaster, County of Fairfield, was incorporated on February 18, 1994 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 14th day of June, A.D. 2021.

**Ohio Secretary of State** 

1 John

Validation Number: 202116505108