

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.

(((H210003045843)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 : (614)280-3338 Phone Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future.

	•	,	•	, 'ω
Cmail	Address:			コラ
	_			TE

FOREIGN PROFIT/NONPROFIT CORPORATION

Arbor Construction Co., Inc.

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

Electronic Filing Menu

Corporate Filing Menu

Help



From: Ranae McGraw

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.

	i i i mpicoppopitent	"COMPANY" "CONDODATION!	1
	corporation; must include "INCORPORATED," Corp.," "Inc.," "Co.," or "Corp.")	"COMPANY, "CORPORATION.	
(If name unavai	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting	business in Florida)
Ohio	3.	(FEI number, if app	
(State or count	ry under the law of which it is incorporated)	(FEI number, if app	licable)
July 18, 1980	5.	(Date of duration, if other the	
(Date of incorporation)		(Date of duration, if other th	nan perpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
		5 -	, ,
629 Euclid Ave	nue. Suite 1300, Cleveland, Ohio 44114	1 27 11 2	
	(Principa	d office address)	
	(Current mailing	g address, if different)	
	·		
Name and stre	et address of Florida registered agent: (P.O		202
Name and stre	·		2021 AL
Name:	et address of Florida registered agent: (P.O		2021 AUS 1
Name:	et address of Florida registered agent: (P.O C.T Corporation System 1200 South Pine Island Road	. Box <u>NOT</u> acceptable)	2021 AUS 12
Name:	et address of Florida registered agent: (P.O CT Corporation System		2021 AUS 12 AH
Name:	et address of Florida registered agent: (P.O C.T Corporation System 1200 South Pine Island Road	. Box <u>NOT</u> acceptable)	2021 AUS 12 AH 9: SLOWELANY OF S
Name:	et address of Florida registered agent: (P.O.C.T. Corporation System 1200 South Pine Island Road Plantation, (City)	. Box <u>NOT</u> acceptable)	TOOL AUG 12 AM 9: 12 STANKE TANK OF STAT
Name: ffice Address: Registered ag	et address of Florida registered agent: (P.O.C.T. Corporation System 1200 South Pine Island Road Plantation, (City)	. Box NOT acceptable) , Florida	2021 AUS 12 AM 9: 12 the STATE on Parties or Parties or Parties of
Name: ffice Address: Registered agaving been naresignated in thi	et address of Florida registered agent: (P.O.C.T. Corporation System 1200 South Pine Island Road Plantation, (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointment.	. Box NOT acceptable) Florida	e to act in this capac
Name: ffice Address: Registered agaving been nansignated in this rther agree to	et address of Florida registered agent: (P.O. C.T. Corporation System 1200 South Pine Island Road Plantation, (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointmental comply with the provisions of all statutes re	. Box NOT acceptable) , Florida 33324, Florida (Zip code) where of process for the above stated agent as registered agent and agreelative to the proper and complete	e to act in this capac
Name: ffice Address: Registered againg been nanesignated in this	et address of Florida registered agent: (P.O.C.T. Corporation System 1200 South Pine Island Road Plantation, (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointment.	. Box NOT acceptable) , Florida 33324, Florida (Zip code) where of process for the above stated agent as registered agent and agreelative to the proper and complete	e to act in this capac
Name: ffice Address: Registered agaving been nanesignated in this	et address of Florida registered agent: (P.O. C.T. Corporation System 1200 South Pine Island Road Plantation, (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointmental comply with the provisions of all statutes re	. Box NOT acceptable)	e to act in this capac
Name: Registered agaving been naresignated in this rither, and I am	et address of Florida registered agent: (P.O) (CT Corporation System) 1200 South Pine Island Road Plantation, (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointmental comply with the provisions of all statutes refamiliar with and accept the obligations of	. Box NOT acceptable)	e to act in this capac

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.

Page: 4 of 5

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director: Robert L. Stark
Address: .629_Euclid_Avenue_Suite_1.300
Cleveland, Ohio 44114
Director:
Address:
B. OFFICERS
President: Robert L. Stark
Address: 629 Euclid Avenue, Suite 1300
Cleveland, Ohio 44114
Vice President: Ezra F. Stark
Address: 629 Euclid Avenue, Suite 1300
Cleveland, Ohio 44114
Secretary: Brian Midlik
Address: 629 Euclid Avenue, Suite 1300, Cleveland, Ohio 44114
Treasurer: Raymond J. Weiss, Jr.
Address: 629 Euclid Avenue, Suite 1300, Cleveland, Ohio 44114
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer
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.
13. Rubert L. Stark, President

(Typed or printed name and capacity of person signing application)

To: +18506176383 • Page: 5 of 5 2021-98-12 11:23:57 CST 19542080845 From: Ranae McGraw

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 ARBOR CONSTRUCTION CO., INC., an Ohio corporation, Charter No. 557949, having its principal location in Cleveland Heights, County of Cuyahoga, was incorporated on July 17, 1980 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 11th day of August, A.D. 2021.

Ohio Secretary of State

Ful flow

Validation Number: 202122303836