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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.

Michels Trenchless, Inc.

(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co." or "Corp.")

Delaware	3	85-2783927	
07/30-2020		(FEI number, if applicable) Perpetual	
5555			erpetual)
	(Date first transacted business	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	30 12 8 2
		ipal office address)	<u> </u>
PO Box 128, Bro	wnsville, WI 53006		12
	(Current mail	ing address, if different)	PH I:
Name and <u>sures</u> Name:	<u>et address</u> of Florida registered agent: (P. C T Corporation System	.O. Box <u>NOT</u> acceptable)	
ffice Address:	1200 South Pine Island Road		
	Plantation	, Florida	
	(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.

C T Corporation System	Alfred Younan
By Alfal cfm	Assistant Secretary
(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.

EL Names a	and business addresses of off	icers and/or directors:		
A. DIREC	FORS			
Chauman				
Address				
Vice Chairma	n,			
Address'				
Pa	trick D. Michels			
81	7 Main Street			
Hr	syneville WES2006			
Address:				
_				<u> </u>
B. OFFIC	ERS			12
,li President.	ohn Schroeder	<u></u>		
81 Address [.]	7 Mani Street		- 	·····
B	ownsville, WI 53005			
Vice Preside	nt			
Address'				
	N. David Stegeman			
V 1	7 Main Strant Brownsoille WI			
Treasuret				·····
Address:	<u></u>			
ter Tobr	necessary, you may attach an i Schroeder	addendum to the application listing	gadditional officers and/or	lírectors.
		Signature of Director or Officer ment (and who is listed in number)	1 above) affirms that the fa	ets stated herein
 The officer are true and a third degi 	or affector signing this docu I that he or she is aware that t	false information submitted in a doc	ument to the Department of	State constitutes



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MICHELS TRENCHLESS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2821 OCT 12 . . -- -. PH



3352077 8300 SR# 20213481680

You may verify this certificate online at corp.delaware.gov/authver.shtml

84 ch. Secretary

Authentication: 204380241 Date: 10-11-21