

F22000002011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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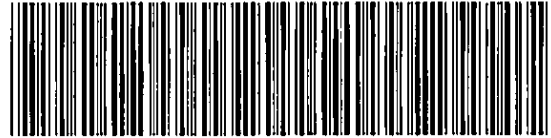
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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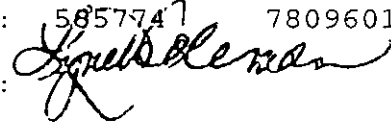
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. LEMIEUX  
APR - 5 2022

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 5857747 7809601

AUTHORIZATION : 

COST LIMIT : \$ 70.00

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ORDER DATE : April 1, 2022

ORDER TIME : 9:13 AM

ORDER NO. : 585774-040

CUSTOMER NO: 7809601  
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FOREIGN FILINGS

NAME: HOLMAN PARTS DISTRIBUTION,  
INC.

XXXX QUALIFICATION (TYPE: CQ)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**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.*

1. Holman Parts Distribution, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 26-3708632  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/12/2008 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 9040 Burrough-Dover Lane, Pennsauken, NJ 08110  
(Principal office street address)
- \_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(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.*

Corporation Service Company

By: \_\_\_\_\_

*Eyleima Bahor*  
Assistant Vice President

(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.

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

FILED  
2022 APR -4 PM 1:11  
STATE DEPT OF STATE  
TALLAHASSEE, FLORIDA

# A. DIRECTORS

☒ Chairman Name: M.K. Holman  
☐ Vice Chairman Address: 4001 Leadenhall Road  
☒ Director Mt. Laurel, NJ 08054  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: C.A. Ortell  
☐ Vice Chairman Address: 4001 Leadenhall Road  
☒ Director Mt. Laurel, NJ 08054  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: C.G. Conroy  
☐ Vice Chairman Address: 4001 Leadenhall Road  
☒ Director Mt. Laurel, NJ 08054  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: A.C. Williams  
☐ Vice Chairman Address: 9040 Burrough-Dover Lane  
☐ Director Pennsauken, NJ 08110  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: P.R. Dondlinger  
☐ Vice Chairman Address: 250 E. Church St  
☐ Director Elmhurst, IL 60126  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☒ Other EXEC VP

☐ Chairman Name: P.M. Azores  
☐ Vice Chairman Address: 4001 Leadenhall Road  
☐ Director Mt. Laurel, NJ 08054  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☒ Other Exec VP

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. K.A. Mullin 3/31/07  
 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. Katherine A. Mullin/Asst Secretary  
 (Typed or printed name and capacity of person signing application)

Holman Parts Distribution, Inc.  
Officers & Directors

Name	Address	Address	Title
M. K. Holman	14 Kendles Run Road Moorestown, NJ 08057	4001 Leadenhall Road Mount Laurel, NJ 08054	Director/ Chairman
C. A. Ortell	730 Golfview Road Moorestown, NJ 08057	4001 Leadenhall Road Mount Laurel, NJ 08054	Director
C. G. Conroy	725 Golfview Road Moorestown, NJ 08057	4001 Leadenhall Road Mount Laurel, NJ 08054	Director
A. C. Williams	906 Pleasant Valley Avenue Mount Laurel, NJ 08054	9040 Burrough-Dover Lane Pennsauken, NJ 08110	President
P. R. Dondlinger	250 E. Church St Elmhurst, IL 60126	1420 Brewster Creek Boulevard Bartlett, IL 60103	Executive Vice President
P. M. Azores	1105 Salem Avenue Voorhees, NJ 08043	4001 Leadenhall Road Mount Laurel, NJ 08054	Executive Vice President / Chief Financial Officer
R. W. Rolier	304B Cypress Point Circle Mount Laurel, NJ 08054	9040 Burrough-Dover Lane Pennsauken, NJ 08110	Vice President - Sales
C. S. Hurren	1 Deer Rest Run Moorestown, NJ 08057	4001 Leadenhall Road Mount Laurel, NJ 08054	Vice President - Finance
B. Blanco	2018 Erin Marie Court Aurora, IL 60503	1420 Brewster Creek Boulevard Bartlett, IL 60103	Vice President
M. A. Bupp	22 Shamrock Road Lumberton, NJ 08048	9040 Burrough-Dover Lane Pennsauken, NJ 08110	Secretary and Assistant Treasurer
B. K. Horwith	4545 Springfield Drive Coplay, PA 18037	4001 Leadenhall Road Mount Laurel, NJ 08054	Vice President - Treasurer
N. N. Swampy	1908 Bishops Castle Drive Olney, MD 20832	4001 Leadenhall Road Mount Laurel, NJ 08054	Assistant Treasurer
K. A. Mullin	757 Paddock Path Moorestown, NJ 08057	4001 Leadenhall Road Mount Laurel, NJ 08054	Director/ Assistant Secretary

# Delaware

The First State

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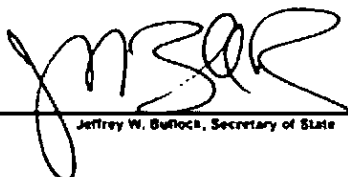
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOLMAN PARTS DISTRIBUTION, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF APRIL, A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOLMAN PARTS DISTRIBUTION, INC." WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2008.

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



  
Jeffrey W. Bullock, Secretary of State

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SR# 20221266522

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203069385

Date: 04-01-22