

11/22/2022 10:05 AM

Division of Corporations

F22000007176

Florida Department of State
Division of Corporations
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To:

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2022 NOV 22 AM 10:37

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

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FOREIGN PROFIT/NONPROFIT CORPORATION
M. JACOB & SONS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
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S. ROBERTS

NOV 22 2022

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. M. Jacob & Sons, 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. Michigan 3. 38-0685690
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 18, 1923 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. 35601 Veronica St, Livonia, MI 48150
(Principal office street address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation FL 33324
(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

By: _____

(Registered agent's signature)

Denise Bell, Asst. Secy.

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]:

A. DIRECTORS

☒ Chairman Name: Matthew McDonnell
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Nick Haratsaris
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☐ Director
☒ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other


☐ Chairman Name: Deborah Jacob
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: David Lubin
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Bruce Jacob
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Paul Stieler
☐ Vice Chairman Address: 35601 Veronica St
Livonia, MI 48150
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

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.  Digitally signed by Nick Haratsaris
DN: cn=Nick Haratsaris, o=FLORIDA DEPARTMENT OF STATE, ou=FLORIDA DEPARTMENT OF STATE, email=nick.haratsaris@floridastate.gov
 Signature of Director or Officer

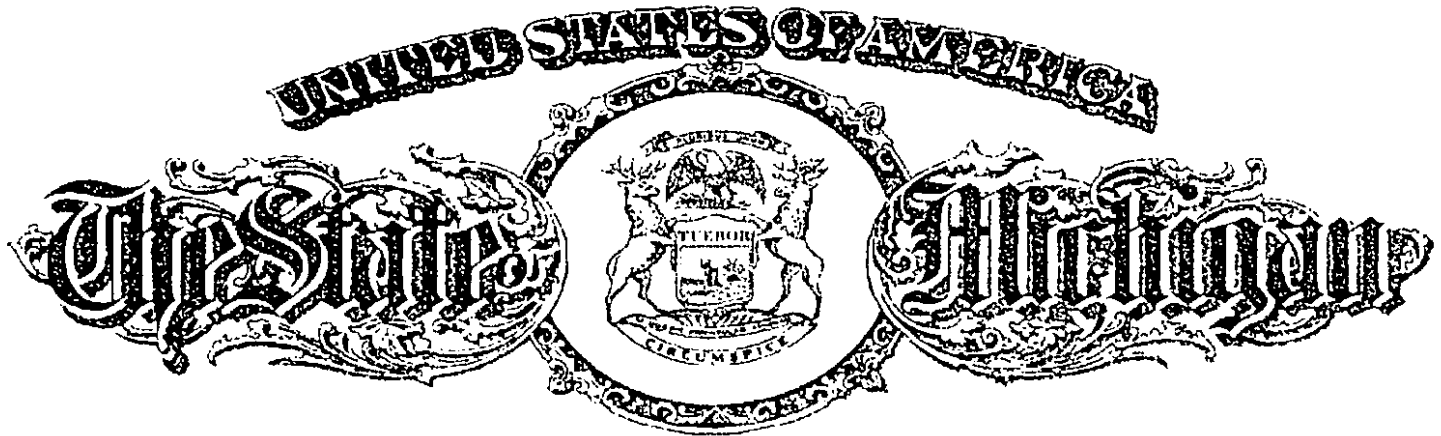
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Nick Haratsaris - President
 (Typed or printed name and capacity of person signing application)

SECTION A: DIRECTORS continued

Elyse Jacob
Director
35601 Veronica St
Livonia, MI 48150

Paul Jacob
Director
35601 Veronica St
Livonia, MI 48150



This is to Certify That

M. JACOB & SONS

*was validly incorporated on October 18, 1923 as a Michigan DOMESTIC PROFIT CORPORATION,
and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation
is in good standing in Michigan as of this date and is duly authorized to transact business and for no other
purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.*



Sent by electronic transmission

Certificate Number: 22110438007

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 21st day of November, 2022.*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau