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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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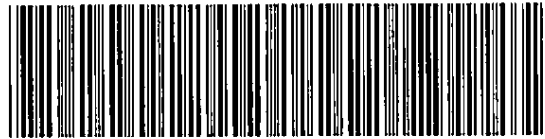
(Business Entity Name)

(Document Number)

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

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**STAFFORD • OWENS**  
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Justin R. Meyer  
Brendan P. Owens  
Meghan E. Zedick

**ASSOCIATE**

Margaret E. McGannon

**RETIRED**

Edward J. Trombley  
Susanna S. Piller

March 24, 2023

**By FedEx**

Florida Secretary of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

RE: *Tremcar U.S.A. Inc.*

Dear Sir or Madam:

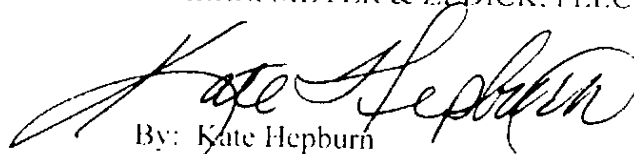
Please find enclosed herewith the original and one (1) copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida with New Hampshire Certificate of Good Standing for Tremcar U.S.A. Inc., cover letter, and a check in the amount of \$78.75 to cover the filing fee for same and one (1) certified copy.

Once filed, it would be appreciated if you would return to me the filing receipt and certified copy to me.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

STAFFORD, OWENS, MURNANE, KELLEHER,  
MILLER, MEYER & ZEDICK, PLLC

  
By: Kate Hepburn  
Corporate Paralegal

Enclosures

Ronald B. Stafford  
(1935-2005)

L:\C1\008000\6751-Tremcar U.S.A. Inc. 308439-Tremcar (General)\Florida\Florida DOS- Application for Authority 3-24-23.docx

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TREMCAR U.S.A. INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KATE HEPBURN

Name of Person

STAFFORD, OWENS, MURNANE, KELLEHER, MILLER, MEYER & ZEDICK, PLLC

Firm/Company

ONE CUMBERLAND AVENUE

Address

PLATTSBURGH, NEW YORK 12901

City/State and Zip code

khepburn@staffordowens.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATE HEPBURN

at ( 518 ) 561-4400

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. TREMCAR U.S.A. 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. NEW HAMPSHIRE 3. 58-2399561

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JUNE 22, 1998

5.

(Date of incorporation)

(Date of duration, if other than perpetual)

6. APRIL 5, 2021

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 436 12TH STREET NE, STRASBURG, OHIO 44680

(Principal office street address)

(Current mailing address, if different)

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

Name: UNITED CORPORATE SERVICES, INC.

Office Address: 9200 SOUTH DADELAND BLVD, SUITE 508

MIAMI

(City)

Florida 33156

(Zip code)

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2023 MAR 27 AM 8:49  
TALLAHASSEE, FL  
SECRETARY OF STATE

**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.*

*Michael A. Barr*

(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]:

**A. DIRECTORS**

☐ Chairman Name: DANIEL TREMBLAY  
☐ Vice Chairman Address: 436 12TH STREET NE  
☒ Director STRASBURG, OHIO 44680  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: MARTIN LUSSIER  
☐ Vice Chairman Address: 436 12TH STREET NE  
☐ Director STRASBURG, OHIO 44680  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

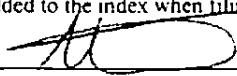
☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: ANNIE TREMBLAY  
☐ Vice Chairman Address: 436 12TH STREET NE  
☒ Director STRASBURG, OHIO 44680  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ 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.   
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. MARTIN LUSSIER, SECRETARY  
(Typed or printed name and capacity of person signing application)

# State of New Hampshire

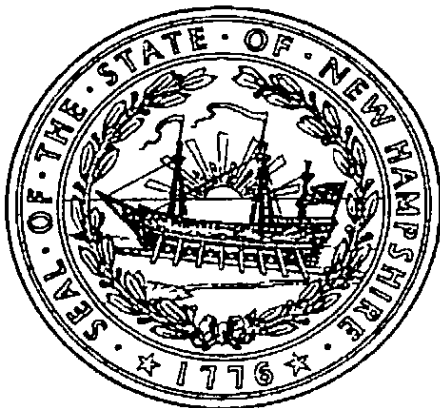
## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that TREMCAR U.S.A. INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on June 22, 1998. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 296252

Certificate Number: 0006166624



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 23rd day of March A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a faint circular outline.

David M. Scanlan  
Secretary of State