

F23000002540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

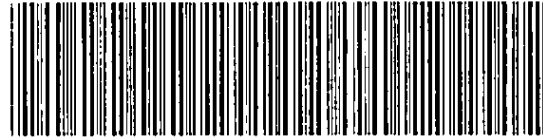
(Business Entity Name)

(Document Number)

Copies _____ Certificates of Status _____

Instructions to Filing Officer:

Office Use Only



600407899396

FILED
2023 MAY -1 PM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2023 MAY -1 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. Jones

CT CORP
(850)656-4724
3458 Lakeshore Drive,
Tallahassee, FL 32312

Date: 05/01/2023

Acc#I20160000072

eric DW

Name:	Magneto & Diesel Injector Service, Inc.
Document #:	
Order #:	14912532

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____
 Ref# _____

Amount: \$ **78.75**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Magneto & Diesel Injector Service, 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:

Joan D. Donovan

Name of Person
Benesch, Friedlander, Coplan & Aronoff LLP

Firm/Company
71 S. Wacker Drive, Suite 1600

Address
Chicago, IL 60606

City/State and Zip code
ggarrett@mddistributors.com

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

For further information concerning this matter, please call:

Joan D. Donovan at (312) 506-3422

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. Magneto & Diesel Injector Service, 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. Texas 3. 74-1502472
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/25/1965 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 7902 FM 1960 Bypass Road West, Humble, TX 77338
(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, Florida 33324
(City) (Zip code)

FILED
2023 MAY -1 PM 09:25
STATE OF FLORIDA
TALLAHASSEE

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.

By: C T Corporation System

Nichol McCroy Nichol McCroy, 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.

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: Kevin Jackson

Vice Chairman Address: 7902 FM 1960 Bypass Rd. West

Director Humble, TX 77338

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Christopher King

Vice Chairman Address: 7902 FM 1960 Bypass Rd. West

Director Humble, TX 77338

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Ryan Gardner

Vice Chairman Address: 7900 FM 1960 Bypass Rd. West

Director Humble, TX 77338

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Grant Garrett

Vice Chairman Address: 7902 FM 1960 Bypass Rd. West

Director Humble, TX 77338

President _____

Vice President _____

Secretary Treasurer

Other CEO Other _____

Chairman Name: James Stoddard

Vice Chairman Address: 7902 FM 1960 Bypass Rd. West

Director Humble, TX 77338

President _____

Vice President _____

Secretary Treasurer

Other CFO Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

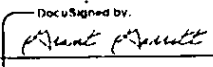
President _____

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.  _____
DocuSigned by: DA829FE3A237429 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. Grant Garrett, CEO _____
 (Typed or printed name and capacity of person signing application)

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Jane Nelson
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for MAGNETO & DIESEL INJECTOR SERVICE, INC. (file number 21131300), a Domestic For-Profit Corporation, was filed in this office on February 25, 1965.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 27, 2023.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State