

F23 000006286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

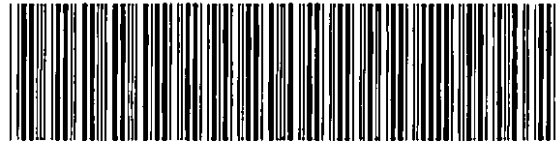
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/31/23--01034--004 **70.00

FILED

2023 OCT 31 PM 7:46

CLERK OF COURT

UK



October 30, 2023

VIA FED EX

FLORIDA DEPARTMENT OF STATE

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

PVS CHEMICALS, INC.
10900 HARPER AVENUE
DETROIT, MI 48213
jtaub@pvschemicals.com
(313) 924-2629

Re: **PVS DX, Inc.**

Dear Sir or Madam:

Enclosed, in duplicate, for filing on behalf of PVS DX, Inc. (the "Company"), a Michigan corporation, are a Cover Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida (together with a certificate issued by the Michigan Department of Licensing and Regulatory Affairs to the effect that the Company is currently in good standing under Michigan Law). Also enclosed is a check payable to the Florida Department of State in the amount of \$70 in payment of the applicable fee.

Following the filing of the Application and the issuance of the requested Certificate of Authority, please send the Certificate of Authority to me in the enclosed Fed Ex return envelope.

If you have any questions or if further information is required, please call me at (313) 924-2629.

Thank you.

Yours very truly,

Jonathan S. Taub
Executive Vice President and General Counsel

JST/djt

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PVS DX, 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:

Jonathan S. Taub

Name of Person

PVS Chemicals, Inc.

Firm/Company

10900 Harper Avenue

Address

Detroit, Michigan 48213

City/State and Zip code

jtaub@pvschemicals.com

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

For further information concerning this matter, please call:

Jonathan S. Taub

at (313) 924-2629

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. PVS DX, Inc.
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- N/A
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Michigan 3. 93-3292784
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/06/2023 5. N/A
(Date of incorporation) (Date of duration, if other than perpetual)
6. Will start transacting business in Florida on 01/01/2024
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 10900 Harper Avenue, Detroit, Michigan 48213
(Principal office street address)
- Same
(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: Sherry McGinnes Sherry McGinnes, 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]:

2023
JAN 10 PM 7:46
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A. DIRECTORS

☐ Chairman Name: David A. Nicholson
☐ Vice Chairman Address: 10900 Harper Avenue
☒ Director Detroit, Michigan 48213
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Kurt Filer
☐ Vice Chairman Address: 300 Jackson Hill Street
☐ Director Houston, Texas 77007
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Milisa M. Bulatovic
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other _____ ☐ Other _____

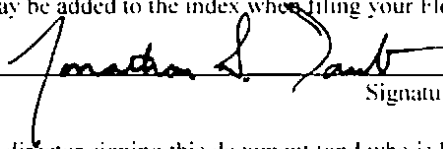
☐ Chairman Name: Timothy F. Nicholson
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Jonathan S. Taub
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Jessica A. Taub
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ 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. Jonathan S. Taub, Secretary

(Typed or printed name and capacity of person signing application)

COVER LETTER

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Division of Corporations

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Name of corporation - must include suffix

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Name of Person

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Firm/Company

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Address

Detroit, Michigan 48213

City/State and Zip code

jtaub@pvschemicals.com

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

For further information concerning this matter, please call:

Jonathan S. Taub

at (313) 924-2629

Name of Person

Area Code

Daytime Telephone Number

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C T Corporation System

By: Sherry McGinnes Sherry McGinnes, 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]:

FILED
2023 OCT 31 PM 7:08
DEPT. OF STATE
TALLAHASSEE, FL

A. DIRECTORS

☐ Chairman Name: David A. Nicholson
☐ Vice Chairman Address: 10900 Harper Avenue
☒ Director Detroit, Michigan 48213
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Kurt Filer
☐ Vice Chairman Address: 300 Jackson Hill Street
☐ Director Houston, Texas 77007
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

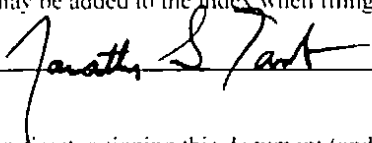
☐ Chairman Name: Milisa M. Bulatovic
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Timothy F. Nicholson
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Jonathan S. Taub
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

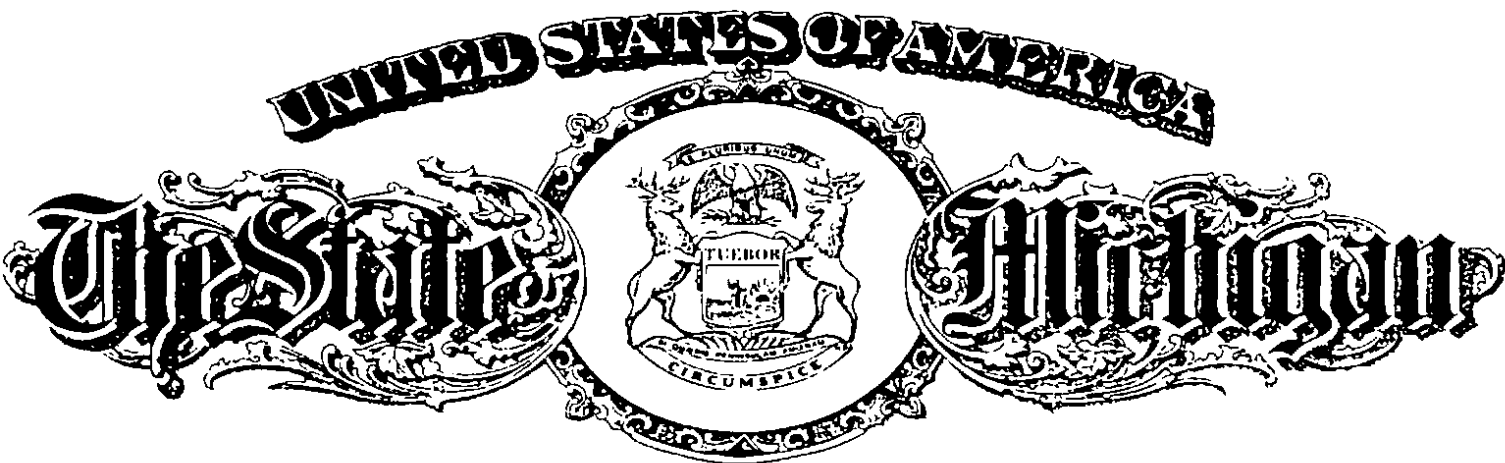
☐ Chairman Name: Jessica A. Taub
☐ Vice Chairman Address: 10900 Harper Avenue
☐ Director Detroit, Michigan 48213
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ Other _____

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13. Jonathan S. Taub, Secretary
(Typed or printed name and capacity of person signing application)



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

PVS DX, INC.

was validly incorporated on September 6, 2023 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: 23100446006

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 20th day of October, 2023.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

Return Shipment Instructions



Return Shipment Instructions

1. Place the shipping label on the container's most visible side away from seams

2. Ship your package one of three ways

- Use your regular scheduled pickup
- Drop off at FedEx. Find your closest location at fedex.com/locate or by calling 1 800 GoFedEx 1 800 463 3339
- Schedule a pickup. No account number required but label information may be needed. Go to fedex.com/returnpickup for FedEx Ground labels with "G" or "PRP" or call 1 800 GoFedEx 1 800 463 3339 and say:
 - o "Return Manager" or "PRP" for FedEx Ground labels with "G" or "PRP"
 - o "Express Return" for FedEx Express labels with "E" or "Bilable Stamp"

Prepare Your Package With Care.

- Use an appropriate container, cushioning materials and at least three slips of packing tape.
- If reusing packaging, remove or black out old shipping labels including their barcode(s)

Special Instructions from the merchant