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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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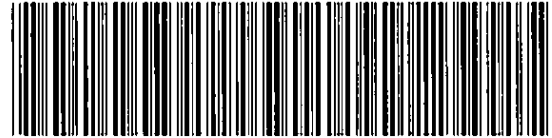
(Business Entity Name)

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TALLAHASSEE, FL

2023 DEC 11 AM 11:29

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE GLOCKNER CHEVROLET COMPANY

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:

AARON J. HEIGHTON

Name of Person

THE GLOCKNER CHEVROLET COMPANY C/O HAYFLICH CPAS PLLC

Firm/Company

300 8TH STREET - 3RD FLOOR

Address

HUNTINGTON, WV 25701

City/State and Zip code

KEVINELLER@GLOCKNER.COM

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

For further information concerning this matter, please call:

AARON J. HEIGHTON

at (304) 697-5700

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. THE GLOCKNER CHEVROLET COMPANY  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

THE GLOCKNER FAMILY CHEVROLET COMPANY

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. OHIO 3. 31-4190600  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/21/1927 5. PERPETUAL  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 111 2ND AVENUE NE - SUITE 528, ST PETERSBURG FLORIDA 33701  
(Principal office street address)  
PO BOX 1308, PORTSMOUTH OHIO 45662-1308  
(Current mailing address, if different)

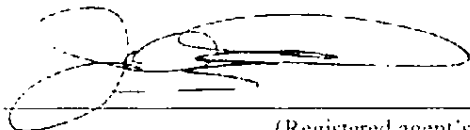
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JAMES O. DONNALLY

Office Address: 111 2ND AVENUE NE - SUITE 528  
ST PETERSBURG, Florida 33701  
(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.*



(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 DEC 11 AM 11:29**  
SECRETARY OF STATE  
TALLAHASSEE, FL

**A. DIRECTORS**

☐ Chairman Name: TIMOTHY E. GLOCKNER  
☐ Vice Chairman Address: PO BOX 1308  
☐ Director PORTSMOUTH, OHIO 45662-1308  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: JOSEPH C. GLOCKNER  
☐ Vice Chairman Address: PO BOX 1308  
☐ Director PORTSMOUTH, OHIO 45662-1308  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_


☐ Chairman Name: MICHAEL P. GLOCKNER  
☐ Vice Chairman Address: PO BOX 1308  
☐ Director PORTSMOUTH, OHIO 45662-1308  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: ANDREW M. GLOCKNER  
☐ Vice Chairman Address: PO BOX 1308  
☐ Director PORTSMOUTH, OHIO 45662-1308  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: JAMES O. DONNALLY  
☐ Vice Chairman Address: 111 2ND AVE NE - STE 528  
☐ Director ST PETERSBURG FL 33701  
☐ 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. JAMES O. DONNALLY VP \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show THE GLOCKNER CHEVROLET COMPANY, an Ohio corporation, Charter No. 127184, having its principal location in Portsmouth, County of Scioto, was incorporated on July 21, 1927 and is currently in GOOD STANDING upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 5th day of December, A.D. 2023.*

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202333904494