

F99000006627

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: John W. Mahon 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", 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:

100003076341--0
-12/21/99--01046--012
*****70.00 *****70.00

John W. Mahon

(Name of Person)

John W. Mahon Company

(Firm/Company)

6035 Falconbridge Place

(Address)

Mount Dora, FL 32757

(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Should you need to call someone concerning this matter, please call:

Janet M. Mahon

(Name of Person)

at (352) 385-0824

(Area Code & Daytime Telephone Number)

mtu
12/23

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$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. John W. Mahon Company
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Ohio 3. 34-1029097
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9-3-68 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. January, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 6035 Falconbridge Pl
Mount Dora FL 32757
(Current mailing address)
8. Sales of Railroad Supplies and Equipment
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: John W. Mahon
Office Address: 6035 Falconbridge Pl
Mount Dora, Florida, 32757
(Zip code)

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10. 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)

11. 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.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: John W. Mahon

Address: 6035 Falconbridge Pl.
Mount Dora, FL 32757

Vice Chairman: _____

Address: _____

Director: Janet M. Mahon

Address: 6035 Falconbridge Pl.
Mount Dora, FL 32757

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: John W. Mahon

Address: 6035 Falconbridge Pl.
Mount Dora FL 32757

Vice President: Janet M. Mahon

Address: Same

Secretary: Janet M. Mahon

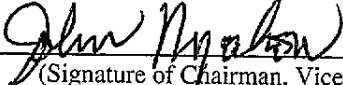
Address: Same

Treasurer: John W. Mahon

Address: Same

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. John W. Mahon, Chairman
(Typed or printed name and capacity of person signing application)

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

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I, J. Kenneth Blackwell, 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 corporations; that said records show JOHN W. MAHON CO., an Ohio corporation, Charter No. 375148, having its principal location in Cleveland, County of Cuyahoga, was incorporated on September 3rd, 1968 and is currently in GOOD STANDING upon the records of this office.

WITNESS my hand and official
seal at Columbus, Ohio
November 4, 1999

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



J. Kenneth Blackwell

J. Kenneth Blackwell
Secretary of State