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| (Re                     | equestor's Name)   |             |
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| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer.    |             |
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T GLASS



115 N CALHOUN, ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date:     | 06/19/2020                |                       |                      |
|-----------|---------------------------|-----------------------|----------------------|
|           | Marcel Ogbonna-           | Amu                   |                      |
| Reference | e #:1227947               | ,<br>                 |                      |
|           |                           |                       | NG & CONSULTING, LLC |
| _         | icles of Incorporation/Au | thorization to Transa | act Business         |
| _         | ange of Agent             | FILE                  | ANY ISSUES, CALL     |
| ☐ Re      | instatement               | SECOND                | (518) 213 - 0826     |
| Co        | nversion                  |                       | Thank you!           |
| ☐ Me      | erger                     |                       |                      |
| ☐ Dis     | ssolution/Withdrawal      |                       |                      |
| ☐ Fic     | titious Name              |                       | ;                    |
| Oth       | her                       |                       |                      |
|           |                           |                       | -                    |
| Authorize | d Amount:\$1              | 25.00                 |                      |
| Signature | y Marcel Og               | bound Ann             |                      |

F: 800.944.6607

F: +852.2682.9790



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2020

COGENCY GLOBAL

SUBJECT: CUSTOM HARDWARE ENGINEERING & CONSULTING, LLC

Ref. Number: W20000065754

We have received your document for CUSTOM HARDWARE ENGINEERING & CONSULTING, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is F00000000363.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 820A00012685

#### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

| ERING & CONSULTING, LLC. | UBJECT: CUSTOM HARDWARE E | SUBJECT: |
|--------------------------|---------------------------|----------|
|                          |                           |          |

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

|  |                        | Name of Pe     | rson             |   | _            |
|--|------------------------|----------------|------------------|---|--------------|
|  | COGEN                  | ICY GLC        | BAL IN           | IC.   |              |
| _  |                        | Firm/Comp      | any              |   | _            |
|  | 115 N CA               | LHOUN          | ST. SU           | IITE 4  |              |
| <del></del>  |                        | Addres         | s                |   | _            |
|  | TALLAH                 | HASSEE         | , FL, 32         | 301   |              |
| City/State and Zip Code  |                        |                |                  |   | _            |
|  | kawilson(              | @parkpla       | acetech          | .com  |              |
| E-   | mail address: (to be   | used for futur | e annual rep     | port notification)  | د-ء          |
|  |                        | _              |                  |   |              |
| er information concerning thi  | is matter, please cal. | l:             |                  |   |              |
| er information concerning thi<br>Katherine   | •                      |                | 281 ,            | 6392264   | ;<br>;<br>;; |
| Katherine  | •                      | at (           | 281<br>ca Code   | 6392264  Daytime Telephone Number   | — လ          |
| Katherine<br>Name of Co  | e Wilson               | at (           | ea Code          | Daytime Telephone Number  | — လ          |
| Katherine  | e Wilson               | at (           | ca Code S^       | Daytime Telephone Number  FREET ADDRESS:  ivision of Corporations   | — လ          |
| Katherine Name of Co MAILING ADDRESS: Division of Corporations Registration Section            | e Wilson               | at (           | ca Code Sr D     | Daytime Telephone Number  FREET ADDRESS:  (vision of Corporations  egistration Section  | — လ          |
| Name of Community MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 | e Wilson               | at (           | ca Code  S' D Re | Daytime Telephone Number  FREET ADDRESS:  ivision of Corporations egistration Section  ifton Building                             |              |
| Katherine Name of Co MAILING ADDRESS: Division of Corporations Registration Section            | e Wilson               | at (           | ca Code  Sr D Re | Daytime Telephone Number  FREET ADDRESS:  Evision of Corporations Egistration Section  Effon Building  Ed Executive Center Circle | — လ          |
| Name of Community MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 | e Wilson               | at (           | ca Code  Sr D Re | Daytime Telephone Number  FREET ADDRESS:  ivision of Corporations egistration Section  ifton Building                             | — လ          |

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CUSTOM HARDWARE ENGINEERING & CONSULTING, LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability.) 5910 Landerbrook Drive 5910 Landerbrook Drive (Street Address of Principal Office) Cleveland, Ohio, 44124 Cleveland, Ohio, 44124 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: Office Address: 115 North Calhoun St. Suite 4 Tallahassee , Florida 3230 Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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. ERIC HOOD, Assistant Secretary /s/Eric Hood (Registered agent's signature)

| 8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:   |                                 |                    |   |  |  |
|--|---------------------------------|--------------------|---|--|--|
| Title or Capacity:   | Name and Address:               | Title or Capacity: | Name and Address: Name: BETSY DELLINGER |  |  |
| Manager  | Name: 5910 Landerbrook Drive    |                    | Address: 5910 Landerbrook Drive         |  |  |
| Member   | Cleveland, Ohio, 44124          | Member  Authorized | Cleveland, Ohio, 44124                  |  |  |
| Authorized   |                                 | _                  |   |  |  |
| Person      Presid   | ent                             | Person Secre       | tary                                    |  |  |
| X Other  | Other                           | X Other            | Other                                   |  |  |
| Manager  | Name:STELLA MAY                 | Manager            | Name: GREG BUEHNER                      |  |  |
| Member   | Address: 5910 Landerbrook Drive | Member             | Address: 5910 Landerbrook Drive         |  |  |
| Authorized   | Cleveland, Ohio, 44124          | Authorized         | Cleveland, Ohio, 44124                  |  |  |
| Person   |                                 | Person             |   |  |  |
| XOther Vice Pres   | sident Other                    | XOther_Treasu      | urer Other                              |  |  |
| _  |                                 |                    | <del></del>                             |  |  |
| Manager  | Name:                           | Manager            | Name:                                   |  |  |
| Member   | Address:                        | Member             | Address:                                |  |  |
| Authorized   |                                 | Authorized         |   |  |  |
| Person   |                                 | Person             |   |  |  |
| Other_   | Other                           | Other_             | Other 22                                |  |  |
| 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.  9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)  10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.  /s/Betsy Dellinger |                                 |                    |   |  |  |
| Signature of an authorized person  |                                 |                    |   |  |  |
| BETSY DELLINGER, SECRETARY   |                                 |                    |   |  |  |

Typed or printed name of signee

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CUSTOM HARDWARE ENGINEERING &

CONSULTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF

JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CUSTOM HARDWARE ENGINEERING & CONSULTING, LLC" WAS FORMED ON THE SECOND DAY OF JANUARY, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203124901

Date: 06-17-20



June 25, 2020

Florida Department of State Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Re: Consent to Use of Name

Ladies and Gentlemen:

The undersigned, a Corporation, hereby gives permission and consent for Custom Hardware Engineering & Consulting, LLC to use the name Custom Hardware Engineering & Consulting for all business purpose and within and without the state.

Sincerely,

Custom Hardware Engineering & Consulting, Inc.

Betsy Dellinger

Vice President and Secretary

BD:kew

1576 Fencorp Drive Fenton, MO 63026 Voice: 636-305-9669 Fax: 636-305-1441 www.checonsulting.com