

M24 000000/39

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

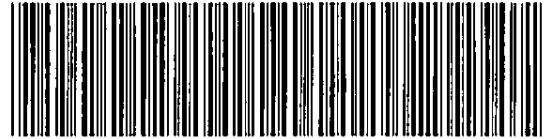
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2024 JAN -4 PM 12:57

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2024 JAN -4 PM 6:03

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

Date: 01/04/2024

Acc#120160000072

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| | |
|-------------|------------------|
| Name: | MARCO GROUP, LLC |
| Document #: | |
| Order #: | 15301254 - 1 |

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|-----------------------------------|--------------------------|-------------------------|--|
| 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: | |

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

Email Address for Annual Report Notifications:

catalina.betancourt@marcorubber.com

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

Amount: \$ **125.00**

Thank you!

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:

1. Marco Group, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Marco Rubber, 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."

2. New Hampshire 3. 04-2706549
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 35 Woodworkers Way 6. 35 Woodworkers Way
(Street Address of Principal Office) (Mailing Address)
Seabrook, NH 03874 Seabrook, NH 03874

7. 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
2024 JAN -4 PM 6:02
TALLAHASSEE, FL

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.

By: Laura R Broderick C T Corporation System
(Registered agent's signature) Laura R. Broderick, Assistant Secretary

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:**

☐ Manager Name: Marco Rubber Intermediate Holdings, LLC
☒ Member Address: 3401 Tuttle Road, Suite 250
☐ Authorized Shaker Heights, OH 44122
 Person _____
☐ Other _____ ☐ Other _____

Title or Capacity:**Name and Address:**

☒ Manager Name: Martin Daley
☐ Member Address: 35 Woodworkers Way
☐ Authorized Seabrook, NH 03874
 Person _____
☐ Other _____ ☐ Other _____

☒ Manager Name: Chad J. Belinsky
☐ Member Address: 35 Woodworkers Way
☐ Authorized Seabrook, NH 03874
 Person _____
☐ Other _____ ☐ Other _____

☒ Manager Name: Christopher K. Jones
☐ Member Address: 3401 Tuttle Road, Suite 250
☐ Authorized Shaker Heights, OH 44122
 Person _____
☐ Other _____ ☐ Other _____

☒ Manager Name: Matthew Bowen
☐ Member Address: 3401 Tuttle Road, Suite 250
☐ Authorized Shaker Heights, OH 44122
 Person _____
☐ Other _____ ☐ Other _____

☒ Manager Name: Peter Jenkins
☐ Member Address: 35 Woodworkers Way
☐ Authorized Seabrook, NH 03874
 Person _____
☐ 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.

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.

DocuSigned by:

Matthew Bowen

C3:B4TC0A5E74D6

Signature of an authorized person

Matthew Bowen

Typed or printed name of signer

Attachment to Application by Foreign Limited Liability
Company for Authorization to Transact Business In Florida
of Marco Group, LLC

8.

| Title or Capacity: | Name and Address: |
|--------------------|--|
| Manager | Brad Mundt 35 Woodworkers Way Seabrook, NH 03874 |

State of New Hampshire

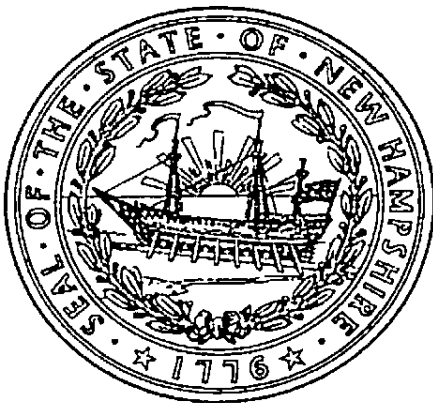
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that MARCO GROUP, LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on January 12, 2012. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 664445

Certificate Number: 0006366799



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 2nd day of January A.D. 2024.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a faint circular outline.

David M. Scanlan
Secretary of State