

To:

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2024-06-20 14:18:56 CST

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From: David Thomas

6/20/24, 4:11 PM

Division of Corporations

**F2400003356**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (614)573-3996

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: tolontz@unarcorack.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**UNARCO Material Handling, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2024 JUN 20 AM 7:35

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## 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. UNARCO Material Handling, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Tennessee 3. 62-1593382  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/30/1995 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Filing  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 701 16th Ave East, Springfield, TN 37172  
(Principal office street address)  
\_\_\_\_\_  
(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: \_\_\_\_\_

(Registered agent's signature)

Stephanie Hencz, Assistante Secretary

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]:

**A. DIRECTORS**

☐ Chairman Name: Paul W Neal  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☒ Director  
☐ President  
☐ Vice President  
☐ Secretary ☐ Treasurer  
☐ Other ☐ Other

☐ Chairman Name: Linda Lascara  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☐ Director  
☐ President  
☒ Vice President  
☐ Secretary ☐ Treasurer  
☐ Other ☐ Other

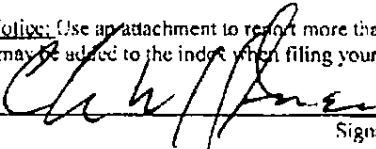
☐ Chairman Name: Ira L. Rennert  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☒ Director  
☐ President  
☐ Vice President  
☐ Secretary ☐ Treasurer  
☐ Other ☐ Other

☐ Chairman Name: Brice Stephan  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☐ Director  
☐ President  
☐ Vice President  
☒ Secretary ☐ Treasurer  
☐ Other ☐ Other

☐ Chairman Name: Christopher Williamson  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☐ Director  
☐ President  
☒ Vice President  
☐ Secretary ☐ Treasurer  
☐ Other ☐ Other

☐ Chairman Name: Ari Rennert  
☐ Vice Chairman Address: 701 16th Ave East  
Springfield, TN 37172  
☒ 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. Christopher Williamson, Vice-President  
 (Typed or printed name and capacity of person signing application)



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

WOLTERS KLUWER  
WOLTERS KLUWER  
600 SOUTH 2ND STREET SUITE 104  
SPRINGFIELD, IL 62704

June 17, 2024

Request Type: Certificate of Existence/Authorization  
Request #: 0588206

Issuance Date: 06/17/2024  
Copies Requested: 1

Document Receipt

Receipt #: 009068600

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3876196087

\$20.00

Regarding: UNARCO MATERIAL HANDLING, INC.

Filing Type: For-profit Corporation - Domestic

Control #: 289886

Formation/Qualification Date: 01/30/1995

Date Formed: 01/30/1995

Status: Active

Formation Locale: TENNESSEE

Duration/Term: Perpetual

Inactive Date:

Business County: ROBERTSON COUNTY

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**UNARCO MATERIAL HANDLING, INC.**

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

**Tre Hargett**  
Secretary of State

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