

F25000000444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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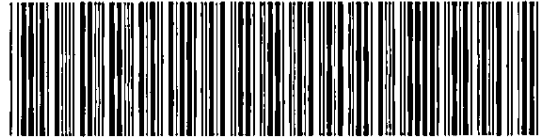
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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25 JAN 27 PM 12:56

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2025 JAN 27 PM 1:58
JAN 27 2025

MS

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

Date: 01/27/2025

Acc#I20160000072

en: c DW

Name:	Messer Construction Co.
Document #:	
Order #:	16111216

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:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
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Email Address for Annual Report Notifications:

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W.P. Verifier _____
Ref# _____

Amount: \$ 70.00

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Messer Construction Co.

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:

Ashley Fickenscher

Name of Person

Taft Stettinius & Hollister LLP

Firm/Company

425 Walnut Street, Ste. 1800

Address

Cincinnati, OH 45202

City/State and Zip code

afickenscher@taftlaw.com

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

For further information concerning this matter, please call:

Ashley Fickenscher

at (513) 357-9458

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. Messer Construction Co.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

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

2. OH 3. 31-0740877
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/06/1968 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. Messer Capital Management, 643 W. Court Street, Cincinnati, OH 45203
(Principal office street address)

Messer Capital Management, 643 W. Court Street, Cincinnati, OH 45203
(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.

By: Laura R Broderick Laura R Broderick, Asst. Secretary
(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
25 JAN 27 PM 12:56

A. DIRECTORS

☐ Chairman Name: Timothy J. Steigerwald
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Nicholas Apanius
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☒ Other Senior VP ☐ Other _____

☐ Chairman Name: Steven M. Bestard
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other COO ☐ Other _____

☐ Chairman Name: Kevin M. Cozart
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Senior VP ☐ Other _____

☐ Chairman Name: Matthew W. Barney
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other Senior VP ☐ Other CFO

☐ Chairman Name: Alex Muñoz
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Senior VP ☐ 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. Matthew W. Barney
 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. Matthew W. Barney, Senior VP and CFO
 (Typed or printed name and capacity of person signing application)

A. DIRECTORS

☐ Chairman Name: Michael P. Hann
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Christopher M. Malinowski
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Mark A. Hill
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: John E. Megibben
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Thomas M. Lampe
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Paul J. Schmidt, III
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

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12. _____
 Signature of Director or Officer

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13. _____
 (Typed or printed name and capacity of person signing application)

A. DIRECTORS

☐ Chairman Name: Matthew R. Schnelle
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Matthew R. Verst
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Ryan M. Steinert
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Sonya N. Walton
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Erin M. Thompson
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Robert L. Williams
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

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12. _____
 Signature of Director or Officer

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13. _____
 (Typed or printed name and capacity of person signing application)

A. DIRECTORS

☐ Chairman Name: Stanford T. Williams
☐ Vice Chairman Address: 643 W. Court Street
☐ Director Cincinnati, OH 45203
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

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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. _____
(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 MESSER CONSTRUCTION CO., an Ohio corporation, Charter No. 368667, having its principal location in Cincinnati, County of Hamilton, was incorporated on February 6, 1968 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 9th day of January, A.D. 2025.*

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

Ohio Secretary of State

Validation Number: 202500903058