

F07000005115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

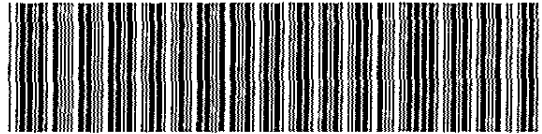
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 OCT 15 PM 2:21  
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B. McKnight OCT 16 2007

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Mahle Clevite Inc.

(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:

Suvarna Joshi

(Name of Person)

Mahle Clevite Inc.

(Firm/Company)

41000 Vincenti Ct

(Address)

Novi MI 48375

(City/State and Zip code)

For further information concerning this matter, please call:

Suvarna Joshi

(Name of Person)

at ( 248 ) 473-6510.

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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. Mahle Clevite Inc.

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

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

2. Delaware

(State or country under the law of which it is incorporated)

3. 20-8331397

(FEI number, if applicable)

4. 01/12/2007

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 03/10/2007

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

7. 1350 Eisenhower Place, Ann Arbor, MI , 48108

(Principal office address)

41000 Vincenti Ct, Novi, MI, 48375

(Current mailing address)

8. Aftermarket Engine parts selling

(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 NOT acceptable)

Name:

C T Corporation system

Office Address:

1200 S. Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

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.*

Claudia L. Saari  
Asst. Secretary

Claudia L. Saari  
(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.

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FILED

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Mr. Milton Laugenio

Address: MAHLE Componentes de Motores do Brazil Stda., Av. Tiradentes, 251  
Itajuba MG Brazil ,37504-088

Director: Dr. Rudolf Paulik

Address: Mahle GmbH, Pragstrasse 26 - 46, D- 70376  
Stuttgart Germany

**B. OFFICERS**

President: Arnd Franz

Address: 1350 Eisenhower Place  
Ann Arbor MI 48108

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: William O Foutch

Address: 830 W 1st North St, Morristown, TN 37814

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. William O Foutch  
(Signature of Director or Officer listed in number 12 of the application)

14. William O. Foutch, Jr. Secretary  
(Typed or printed name and capacity of person signing application)

APPROVED  
AND  
FILED  
07 OCT 15 PM 2:25  
SECURITY  
DIVISION  
OF THE  
DEPT OF  
COMMERCE

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAHLE CLEVITE INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF OCTOBER, A.D. 2007.

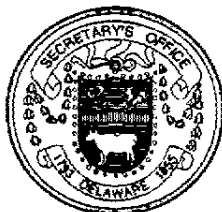
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

07 OCT 15 PM 2:25  
SECRETARY OF STATE  
WINDSOR  
FILED

APPROPRIATE  
FILED

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*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6050874

DATE: 10-04-07