

P21000022164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

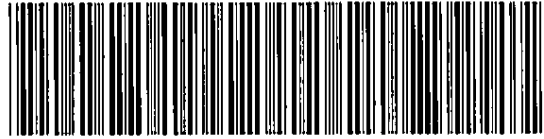
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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2021 MAR -9 AM 10:39



2021 MAR -9 11:12:26



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

Account#: I20000000088

Date: 03/09/2021

Name: Chris Vick

Reference #: 1337938

Entity Name: SCHEER PAS NORTH AMERICA, INC.

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other \_\_\_\_\_

Authorized Amount: *Chris Vick* \$70.00

Signature: \_\_\_\_\_

# COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Scheer PAS North America, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: Rebecca Lewis  
Name (Printed or typed)  
301 Grant Street, 14th Floor  
Address  
Pittsburgh, PA 15219  
City, State & Zip  
412-394-7742  
Daytime Telephone number  
rlewis@clarkhill.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
 In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**      Scheer PAS North America, Inc.  
 The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
 Principal street address      Mailing address, if different is:  
 Uni-Campus Nord 5  
 Saarbruecken, Saarland 66123  
 Germany

**ARTICLE III PURPOSE**  
 The purpose for which the corporation is organized is: Any and all lawful purpose.

**ARTICLE IV SHARES**      1,000  
 The number of shares of stock is: \_\_\_\_\_

2021 MAR - 9 AM 10:40

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>August-Wilhelm Scheer, President</u>	Name and Title: <u>August-Wilhelm Scheer, Secretary</u>
Address: <u>Uni-Campus Nord 5</u>	Address: <u>Uni-Campus Nord 5</u>
<u>Saarbruecken, Saarland 66123</u>	<u>Saarbruecken, Saarland 66123</u>
<u>Germany</u>	<u>Germany</u>

Name and Title: <u>August-Wilhelm Scheer, Treasurer</u>	Name and Title: _____
Address: <u>Uni-Campus Nord 5</u>	Address: _____
<u>Saarbruecken, Saarland 66123</u>	_____
<u>Germany</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: COGENCY GLOBAL, INC.  
Address: 115 North Calhoun Street, Suite 4  
Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rebecca Lewis  
Address: 301 Grant Street, 14th Floor  
Pittsburgh, PA 15219

**ARTICLE VIII EFFECTIVE DATE:**

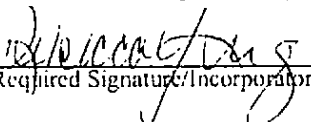
Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

/S/ SHANNON M. MADDOX 3/9/2021  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

 3.9.21  
Required Signature/Incorporator Date