# F-198888884619

(Requestor's Name)						
(Address)						
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(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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# FLORIDA DEPARTMENT OF STATE Division of Corporations

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April 9, 2010

JILL PHILLIPS SICOM SYSTEMS, INC. 4140 SKYRON DR. DOYLESTOWN, PA 18902

SUBJECT: SICOM SYSTEMS, INC. Ref. Number: W10000017454

We have received your document for SICOM SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham Regulatory Specialist II New Filing Section

Letter Number: 710A00008769

www.sunbiz.org

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Story of the Parks TO: **New Filing Section Division of Corporations SUBJECT:** 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: (Name of Person) For further information concerning this matter, please call:

## 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

# ANSACTION PHONE IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (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. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address (Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: Florida \_ (City) 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. (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.

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

# A. DIRECTORS

Chairman:					
Address					Parties and
Vice Chairman					
Address					
Director	PARAMETERS AND A MARKET AND A SECOND AND A SECOND ASSESSMENT AS A SECOND AS A SECOND ASSESSMENT AS A SECOND	ALC: THE CHIEF STANDARD FOR	<b>"好","我们是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>		CONTRACTOR OF THE SECOND
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Vice President Page					
Address					
	Partition and in				
Secretary 2					
Adorestles					
Treasurer					
Address * 12					
NOTE: If necessa	iry, you may attach an a	iddendum to the appl	ication listing additi	onal officers and/or	Brong Caro
13.				· fing s	7 00 miles
14 WM.		tor or Officer listed in	n number 12 of the a	application)	PH IZ
14		name and capacity o	of person signing and	plication)	
7					6

# COMMONWEALTH OF PENNSYLVANIA

# DEPARTMENT OF STATE

**AUGUST 9, 2010** 

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SICOM SYSTEMS, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Alloca la particula

**Acting Secretary of the Commonwealth** 

Basil L. Merenda