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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: LINDNER & LINDNER, P.C.
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:
Lisa Granskie for Incorp Services, Inc.
Name of Person
Incorp Services, Inc.
Firm/Company
2360 Corporate Circle, Suite 400
Address
Henderson, NV 89074-7722
City/State and Zip code
jkrawczyk@fblassociates.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisa Granskie at (702) 866-2500 x 6508
Name of Person 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 \$\ \tag{S78.75 Filing Fee & \tag{S78.75 Filing Fee & \tag{S87.50 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.

LINDNER, P.C.				
rporation; must include "INCORPORATE rp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		_
				_
ole in Florida, enter alternate corporate nar	me	adopted for the purpose of transacting business in	Florida)
1	3.	3. N/A		
nder the law of which it is incorporated)		(FEI number, if applicable)		
	5.	Perpetual		
of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
				_
(SEE SECTIONS 607.1501 & 607	7.15	02, F.S., to determine penalty liability)		
e Blvd Yardley PA 19067				
(Principal office a	ddı	ress)	<u>, </u>	_
(Current mailing a	ddı	ress)		_
any legal activity			_	_ 3
of corporation authorized in home state or	co	untry to be carried out in state of Florida)	5	SS SS
address of Florida registered agent: (F	o.c	. Box <u>NOT</u> acceptable)	NO.	
Incorp Services, Inc.			-	
				333
1/888 67th Court North		<u> </u>	ž	である
Loxahatchee		. Florida 33470	ا تر	RAT
(City)		(Zip code)	6	E.
	ple in Florida, enter alternate corporate nate and ander the law of which it is incorporated) (Date first transacted busines (SEE SECTIONS 607.1501 & 607	proration; must include "INCORPORATED, rp," "Inc," "Co," or "Corp.") ble in Florida, enter alternate corporate name a	rporation; must include "INCORPORATED," "COMPANY," "CORPORATION," rp," "Inc," "Co," or "Corp.") ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in a moder the law of which it is incorporated) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual (Duration: Year corp. will cease to exist or "perpetual (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 6 Blvd Yardley PA 19067 (Principal office address) (Current mailing address) (Current mailing address) Any legal activity of corporation authorized in home state or country to be carried out in state of Florida) address of Florida registered agent: (P.O. Box NOT acceptable) Incorp Services, Inc. 17888 67th Court North Loxahatchee , Florida 33470	rporation; must include "INCORPORATED," "COMPANY," "CORPORATION," rp," "Inc," "Co," or "Corp.") ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida a

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. DIRE	ECTORS		
Chairman	· . :		
Address:		<u>.</u>	
_			
Vice Chai	irman:		-
Address:			
_			
Director:	Frank Lindner		
Address:	205 Floral Vale Blvd.		
	Yardley, PA 19067		
Director:	Martha Lindner		- ign
Address:	205 Floral Vale Blvd.	5 2	/38 <u>C</u>
	Yardley, PA 19067	NOV.	27
B. OFFI	ICERS	ъ Р	RY O
	Frank Lindner	PH 12: 4	F ST
	205 Floral Vale Blvd.	46	AIE F
	Yardley, PA 19067		S
	ident: Martha Lindner		
	205 Floral Vale Blvd.		
	Yardley, PA 19067		
Secretary:	Frank Lindner		
-	205 Floral Vale Blvd. Yardley, PA 19067		
	Martha Lindner		
	205 Floral Vale Blvd. Yardley, PA 19067		
Address.			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or direc	tors.	
13.			
	(Signature of Director or Officer listed in number 12 of the application)		
14	Frank Lindner, President		

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

NOVEMBER 8, 2010

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

SECRETARY OF STATE BY CORP REATION

I DO HEREBY CERTIFY THAT,

LINDNER & LINDNER, P.C.

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.

Secretary of the Commonwealth

Basil L. Merenda

Certification Number: 9105296-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp