Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Rma	4.1	Address:

FOREIGN PROFIT/NONPROFIT CORPORATION SELAS FLUID PROCESSING CORPORATION

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$87.50

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Corporate Filing Menu

Help

5/11/2012

https://efile.sunbiz.org/scripts/efilcovr.exe

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Selas Fluid Processing Cornoration 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:	
Mark Frank - CAC	
Selas Huid Processing Corporation	
Frm/Company	
5 Sentry Parkway East Suite 300	
Rlue Rell PA 19422-2312	
City/State and Zip code	
mork. Iron(a) Sclas X luid a cova E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
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 32314	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status	

FI 814 - 03401/2011 C // System Online

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.

		adopted for the purpose of transacting business in	Florida)
Delaware		34-1210803	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
12/03/1982	5. of incorporation)	Perpetual	. 700
	•	(Duration: Year corp. will cease to exist or "per	petuai")
upon qualification		n Florida, if prior to registration)	
		502, F.S., to determine penalty liability)	
Five Sentry Park	way East, Blue Bell, PA 19422		
	(Principal office add	ress)	
same as above			
	(Current mailing add	iress)	
***	· · · · · · · · · · · · · · · · · · ·	iress)	
Heavy Construc	tion		
Heavy Construc	· · · · · · · · · · · · · · · · · · ·		12 H
(Purpose(tion	puntry to be carried out in state of Florida)	12 MAY
(Purpose(tion a) of corporation authorized in home state or co	puntry to be carried out in state of Florida)	12 MAY 13
(Purpose() Name and street	tion a) of corporation authorized in home state or co	puntry to be carried out in state of Florida)	12 MAY 13 P
(Purpose(i	tion a) of corporation authorized in home state or corporation authorized in home state or corporation System 1200 South Pine Island Road	Duntry to be carried out in state of Florida) D. Box NOT acceptable)	12 MAY 13 PM 3
(Purpose(i Name and street Name:	tion a) of corporation authorized in home state or coet address of Florida registered agent: (P.C.C.T. Corporation System	puntry to be carried out in state of Florida)	12 MAY 11 PM 3: 2

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.

PLOSS - GROSTAGES C T System Caline

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: __ Vice Chairman: _____ Address: _ Director: _ Address: **B. OFFICERS** Vice President: Address: Treasurer: Address: NOTE: If necessary, you may affach an addendupy to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 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. BRUCE HENSINGER (Typed or printed name and capacity of person signing application)

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FC/MY - 83/81/2011 C Y Nysicus Ciqüne

Delaware

DACE '

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SELAS FLUID PROCESSING CORPORATION" 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 TENTH DAY OF MAY, A.D. 2012.

AND I DO HERBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SIVISIAN GENERALANDAS

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You may varify this partificate onling

AUTHENTICATION: 9564636

DATE: 05-10-12