

F19000003958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

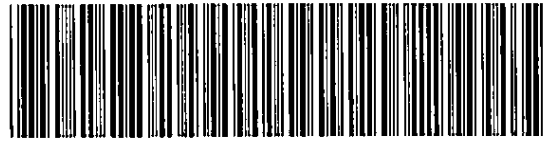
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000074487

Office Use Only



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07/30/19--01031--021 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 AUG 26 PM 3:10

FILED

Y SCOTT
AUG 27 2019





FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2019

MARTY BOROSKY
535 OLD FRANKSTOWN RD.
PITTSBURGH, PA 15239

SUBJECT: TESTEX, INC.
Ref. Number: W19000074487

We have received your document for TESTEX, 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 registered agent must sign accepting the designation.

Please return 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) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 019A00016594

RECEIVED

AUG 26 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TESTEX, 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," 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:

MARTY BOROSKY
Name of Person

TESTEX, INC.
Firm/Company

535 OLD FRANKSTOWN RD.
Address

PITTSBURGH, PA 15239
City/State and Zip code

M. BOROSKY@TESTEX-NDT.COM
E-mail address: (to be used for future annual report notification)

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AUG 26 PM 3:10
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARTY BOROSKY at (412) 798-8990
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration 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. TESTEX, 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. PA 3. 25-1543272
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/30/1987 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 535 OLD FRANKSTOWN RD., PITTSBURGH, PA 15233
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: FLORIDA REGISTERED AGENT LLC

Office Address: 7901 4TH ST N, STE 300
ST. PETERSBURG Florida 33702
(City) (Zip code)

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2009 AUG 26 PM 3:11
TALLAHASSEE, FLORIDA

9. 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.

Bill Hume
(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

B. OFFICERS

President: SUNIL RAMCHANDRAN

Address: 4062 SINAN FARM DR.

EXPORT, PA 15632

Vice President: SID RAMCHANDRAN

Address: 5616 SUMMIT CT.

EXPORT, PA 15632


Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. SUNIL RAMCHANDRAN PRESIDENT

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

07/23/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

TESTEX, INC.

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

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

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2019 AUG 28 PM 3:11
TALLAHASSEE, FLORIDA



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

Katly Bookman

Acting Secretary of the Commonwealth

Certification Number: TSC190723161713-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>