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| (City/State/Zip/Phone #) | | | |
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| PICK-UP WAIT MAIL | | | |
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| · (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: New Filing Section Division of Corporations | |
|---|---|
| SUBJECT: O'Donnell & Naccarat (Name of corporation) | Inc. |
| (Name of corporation | on - must include suffix) |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida. | |
| Please return all correspondence concerning this matte | • |
| Teresa RynKewitz (Name o O'Donnell & Naccarat (Firm/Co | |
| (Name o | f Person) |
| O'Donnell & Naccarat | o Inc. |
| | |
| 111 S. Independence Mall Ed | 1st Bourse Bldg. # 950 |
| (Add | Iress) |
| Phila. PA 19106 (City/State | |
| (City/State | and Zip code) |
| For further information concerning this matter, please | call: |
| Teresa Runkewitz at (215 | 717-3621 |
| Tevesa Rynkewitz at (215 (Name of Person) (Area | Code & Daytime Telephone Number) |
| | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| New Filing Section Division of Corporations | New Filing Section Division of Corporations |
| Clifton Building | P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, FL 32301 | 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 & S87.50 Filing Fee, Certified Copy 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. O'Donn | ell & Naccarato Inc. orporation; must include "INCORPORATED," "Co | | |
|--------------------|---|---------------------------------------|------------------------------|
| (Enter name of c | orporation; must include "INCORPORATED," "Co | OMPANY," "CORPORATION," | , |
| "Inc.," "Co.," "C | orp," "Inc," "Co," or "Corp.") | | |
| O'Donne | 11 & Naccarato Structural | Engineers | |
| (If name unavail | able in Florida, enter alternate corporate name adopt | ted for the purpose of transacting | business in Florida) |
| \mathcal{P}_{1} | under the law of which it is incorporated) | 22-2381252 | |
| (State or country | under the law of which it is incorporated) | (FEI number, if applic | able) |
| 41 | 182 5. | Perpetual _ | |
| (Date | 782 5. (Du | ration: Year corp. will cease to e | xist or "perpetual") |
| 6 | | | |
| | (Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F | |) |
| - 111.6 - | · | | |
| 7. <u>111 J</u> | <u>Independence Mall East Bou</u> (Principal officé address) | 13C Day, # 150, 11 | 1114. 10. 17106 |
| | SAMÉ | | |
| | (Current mailing address) | | |
| C+. | و امریامی | | Z.S. 0.7 |
| 8 | ructural engineering se | rvices | 07 ADR |
| (Purpose(s | s) of corporation authorized in home state or country | y to be carried out in state of Flori | 7355 |
| 9. Name and street | et address of Florida registered agent: (P.O. Bo | x NOT acceptable) | |
| Name: | C T Corporation System | - | FILED 9 PH 2:50 WE FLORIDA |
| Office Address: | 1200 South Pine Island Road | <u>.</u> | SO NIDA |
| | Plantation, FL | , Florida <u>33324</u> | |
| | (City) | (Zip code) | |
| 10 Registered a | gent's accentance | y 5' 1 *11 m | ,**1 |

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.

KORRI A. BEHLER Special Assistant Secretary

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.

| • | FILED |
|--|--|
| 12. Names and business addresses of officers and/or directors: | FILED 07 APR -9 PM 2:50 |
| A. DIRECTORS | rAECRETALDY 2:50 |
| Chairman: | TALLAHASSEE, FLORIDA |
| Address: | |
| Address. | |
| Vice Chairman: | |
| | |
| Address: | |
| Directors | |
| Director: | |
| Address: | |
| Director: | |
| Address: | |
| Address: | |
| B. OFFICERS | |
| President: Nick Cingli | |
| Address: 81 Westminster Court Voorhees, NJ | |
| Address: Or West Minster Street, 103 | 00.13 |
| Vice President: anthony Naccarato | |
| Vice President: <u>Anthony Naccarato</u> Address: <u>H514 Prince ton ave Phila.</u> | Pa 19135 |
| Address. | |
| Secretary: Peter Naccarato | |
| Address: 7000 Torresdale avenue Phila. 7 | a 19135 |
| • 11 | |
| Address: Margaret Hart Address: 3511 Brae Bourne Dr. Huntingdo | in Valley Pa 19006 |
| | 71 |
| NOTE: If necessary, you may attach an addendum to the application listing a | additional officers and/or directors. |
| 13. | ************************************** |
| (Signature of Director or Officer listed in number 12 of | |
| 14. Nick Cingli President & CE (Typed or printed name and capacity of person signing) | ng application) |

ADDENDUM TO APPLICATION

B. Officers (continued)

Vice President:

Mark Lunden

103 Wilton Woods Lane

Media, PA 19063

Vice President:

William O'Donnell

2 Kinder Road

Conshohocken, PA 19428

FILED

07 APR - 9 PM 2: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA SECRETARY OF STATE FLORIDA

DEPARTMENT OF STATE

MARCH 28, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

O'DONNELL & NACCARATO, 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.

Secretary of the Commonwealth

Certification Number: 6604219-1

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