B17000000212

(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:				

Office Use Only



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08/18/17--01003--029 **1061.25

17 SEP -6 PM 12: 11
SELECTION OF STATE
ATT SELECTION

S. WARREN SEP 0 7 2017



August 23, 2017

PAUL R NAIM 1720 METROPOLITAN STREET PITTSBURGH, PA 15233

SUBJECT: MASCARO CONSTRUCTION COMPANY, L.P.

Ref. Number: W17000069591

We have received your document for MASCARO CONSTRUCTION COMPANY, L.P. and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Letter Number: 217A00017414

Stacey M Warren Regulatory Specialist II

www.sunbiz.org





1720 metropolitan street • pittsburgh, pa 15233 phone: 412.321.4901 • fax: 412.321.4922 www.mascaroconstruction.com

August 30, 2017

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Stacey M. Warren

Regulatory Specialist II

RE: Letter No. 217A00017414

Dear Ms. Warren:

Mascaro Construction Company, LP ("MCClp") received your August 23, 2017 correspondence concerning registration to do business in the State of Florida. Enclosed please find MCClp's Certificate of Good Standing issued by the State of Pennsylvania issued on 8/8/2017.

Thank you for your time in this matter. Please contact me should you have any additional questions or require additional information.

Very truly yours,

MASCARO CONSTRUCTION COMPANY, LP

orporate Counsel and Risk Manager

COVER LETTER

2661 Executive Center Circle Tallahassee, FL 32301

TO: Registration Section Division of Corporations				
SUBJECT: Mascaro Construction Company	. LP			
Name of Foreign Limite	d Partnership or Lim	ited Liability Lin	nited Partnership	
The enclosed application, certificate of status partnership to transact business in Florida. Please return all correspondence concerning to		ed to register a fo	oreign limited partnership or limited lia	ibility limited
Paul R. Naim				
Contact Person				
Mascaro Construction Company, LP				
Firm/Company				
1720 Metropolitan Steet				
Address				
Pitsburgh, PA 15233				
City, State and Zip Co	de			
cpenrod@mascaroconstruction.com				
E-mail address: (to be used for future annua	al report notification)			
For further information concerning this matter	r, please call:			
Paul R. Naim	at (321-4901		
Name of Contact Person		ode and Daytime	Telephone Number	
Enclosed is a check for the following amount	:			
S1,000.00 Filing Fees S1,008.75 Filing (\$965 Filing Fee and S35 Registered Agent Fee) S1,008.75 Filing Fees Status		50 Filing Fees Lified Copy	\$1.061.25 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building	Registration	Corporations		

Tallahassee, FL 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

TO TRANSACT BUSINESS IN FLORIDA 1. Mascaro Construction Company, LP (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 2 Pennsylvania, USA State or Country of Formation Date of Formation 4. Federal Employer Identification Number:___25-1800002 5. Name of Registered Agent for Service of Process and Florida Street Address: John C. Mascaro, Sr. 9144 Sloane Street Orlando, FL 32827 6. 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. John C Mascart 55
Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 9144 Sloan Street 1720 metropolitan Street Orlando, FL 32827 Pittsburgh, PA 15233 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: Mascaro Services, Inc Name of General Partner: 1720 Metropolitan Street Street Address: Street Address: Pittsburgh, PA 15233 1720 Metropolitan Street Mailing Address: Mailing Address: Pittsburgh, PA 15233 Name of General Partner:______ Name of General Partner:_____

Mailing Address: Mailing Address:

Street Address:

Street Address:

Name of General Partner:		Name of General Partner:
Street Add	dress:	Street Address:
Mailing A	.ddress:	Mailing Address:
Effective date Note: If the da locument's ef 2. Attached i Norida Depar	ate inserted in this block does not meet the a fective date on the Department of State's rest a certificate of existence duly authenticate timent of State, by the Secretary of State or secretary.	after the date this document is filed by the Florida Department of State.) applicable statutory filing requirements, this date will not be listed as the
	ch it is organized. 7 713 day of Auss	Mummo H
	I signing this document affirms that the fact	is stated herein are true and the individual is aware that false information litutes a third degree felony as provided for in s.817.155, F.S.
	Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2

FILED

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SELVE TARK OF STATE
MATERIAL SECTIONIDA

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

08/08/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

MASCARO CONSTRUCTION COMPANY, L.P.

is duly registered as a Pennsylvania Limited Partnership 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.



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: TSC170807130837-1

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