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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Van Conversions of Lehigh Valley, 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," and check are submitted to register the above referenced foreign corporation transact business in Florida.				
Please return all correspondence concerning this matter to the following:				
Kathleen A. McClay				
(Name of Person)				
Semanoff Ormsby Greenberg & Torchia, LLC				
(Firm/Company)				
610 Old York Road Suite 200				
(Address)				
Jenkintown PA 19046				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Kathleen McClay at (215) 887-0200				
(Name of Person) at (215) 887-0200 (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 \$\sum \\$78.75 Filing Fee & \$\sum \\$78.75 Filing Fee & \$\sum \\$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy				



610 Old York Road Suite 200 Jenkintown, PA 19046 (215) 887-0200 www.soglaw.com

Harold Semanoff Charles W. Ormsby, Jr. Howard N. Greenberg Michael J. Torchia Peter J. Smith Michael B. Dubin Alexis D. Isztwan

Gabrielle J. Sellei Jack A. Rosenbloom* Catherine A. Marriott Stephen C. Goldblum Alfredo M. Sergio Craig M. Chernoff Dominic P. Marco, Jr.

Of Counsel Thomas A. Bell Philip J. Katauskas Frederick M. Savadove*

* LL.M. Tax

February 1, 2007

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Van Conversions of Lehigh Valley, Inc.

Application by Foreign Corporation for Authorization

Dear Sir or Madam:

Attached for filing please find the following:

- 1. Application by Foreign Corporation for Authorization (in duplicate)
- 2. Cover letter (in duplicate)
- 3. Certificate of Good Standing (in duplicate)
- 4. Filing fee

Kindly provide confirmation of the filing in the enclosed postage prepaid envelope. Thank you for your help in this matter.

Kackley a. Mc Clay

Kathleen A. McClay

Paralegal

Enclosures

William Blaser (w/attachment) c:

Charles W. Ormsby, Jr., Esquire (w/o attachment)

PH 3:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, 1505, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Enter name of	corporation; must include " Corp." "Inc." "Co." or "Corp	high Valley, Inc. NCORPORATED," "COMPANY," "CORPORATION"	Ŋ,"
A03 004	capy may ear at car	.,	
farma may	Nable in Florida enter alton	to corporate pume adopted for the purpose of transaction	a levelance in El July
Pennsyl		₃ 23-3090964	of corrects of closton)
iste of coming	y under the law of which it i	incorporated) (FEI number, if app	licepie)
7/24/20	001	s. Perpetual	•
(Dat	e of incorporation)	(Duration: Your corp. will cease to	exist or "perpetual")
lave no	t yet transacte	business in Florida	
•	(Dute first tr	quaeted business in Florida, if prior to registration) 907.1501 & 607.1502, F.S., to determine penalty liabili	
25 C T	rooper Road	Norristown PA 19403	9)
200, 1		rinuipal office address)	
25 C T		~ -	
.00.1	roope Road	Norristown PA 19403	
	. (and introduced	
wn and	i lease vehicle	5	
		n home state or country to be carried out in state of Flo	rīda)
me and sire	ot address of Florida regis	ered agent: (P.O. Box <u>NOT</u> acceptable)	
Name	CT Corporati		
'Assistic:			-
Address:	1200 S. Pine	Island Road	
	Plantation .	Books 33324	
	(Cit)	Plonida 33324 (Zip code)	
		•	*
	puil's acceptance:	i to accept service of process for the above stated	acusinostins us disco
ated in this	application, I hereby acc	vii the appointment as registered agant and agree	to act in Sits capus
r agrice to co	omply with the provisions	of all statutes relative to the proper and complete	performance of my
ım femiller	with and necept the obil	ations of my position as registered agent.	
		· .	
	/ \ ~	W.L NNA Compuls.	HITTAKAR .

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 composite records in the parisdiction under the law of which it is incorporated,

(Registered spent's signatura)

Assistant Vice President

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman;	
Address:	
Vice Chairman:	
Address:	
Director: Jack Donovan	
Address: 925 S. Trooper Road	4
Norristown PA 19403	
Director: William Blaser	<u> </u>
Address: 925 S. Trooper Road	
Norristown PA 19403	- 1000 B
B. OFFICERS	HE P
President: Jack Donovan	<u> </u>
Address: 925 S. Trooper Road	F 5
Norristown PA 19403	
Vice President: William Blaser	
Address: 925 S. Trooper Road	
Norristown PA 19403	
Secretary: William Blaser	
Address: 925 S. Trooper Road Norristown PA 19403	
Treasurer: William Blaser	
Address: 925 S. Trooper Road Norristown PA 19403	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or d	irectors.
13. Miller Mr. For	
(Signature of Director or Officer listed in number 12 of the application) 14. William Blaser, Director	
(Typed or printed name and capacity of person signing application)	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

NOVEMBER 29, 2006

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

VAN CONVERSIONS OF LEHIGH VALLEY, 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

edo a Contis

Certification Number: 6379970-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp