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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

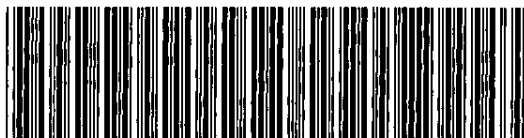
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: M. GERACE ENTERPRISES, 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 to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MICHAEL GERACE

(Name of Person)

M. GERACE ENTERPRISES, INC.

(Firm/Company)

434 PRIMOS AVENUE

(Address)

FOLCROFT

PA

19032

(City/State and Zip code)

For further information concerning this matter, please call:

MICHAEL GERACE

(Name of Person)

at (484) 494-5777

(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 ☒ \$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. **M. GERACE ENTERPRISES, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

GERACE ENTERPRISES LLC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **PENNSYLVANIA**

(State or country under the law of which it is incorporated)

3. **20-1237958**

(FEI number, if applicable)

4. **April 28, 2004**

(Date of incorporation)

5. **perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **FEBRUARY 2, 2009**

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

7. **801259 US HIGHWAY 17, YULEE, FL 32097**

(Principal office address)

434 PRIMOS AVENUE, FOLCROFT, PA 19032

(Current mailing address)

8. **Trucking Company and Service and Repair Shop for chassis and containers**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: **MICHAEL GERACE**

Office Address: **801259 US HIGHWAY 17**

YULEE

(City)

, Florida **32097**

(Zip code)

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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.



(Registered agent's signature)

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.

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

A. DIRECTORS

Chairman: _____
Address: _____
Vice Chairman: _____
Address: _____
Director: _____
Address: _____
Director: _____
Address: _____

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B. OFFICERS

President: MICHAEL GERACE
Address: 434 PRIMOS AVENUE
FOLCROFT PA 19032
Vice President: Nancy Gerace
Address: 434 PRIMOS AVENUE
FOLCROFT PA 19032
Secretary: Nancy Gerace
Address: 434 PRIMOS AVENUE. FOLCROFT, PA 19032
Treasurer: MICHAEL GERACE
Address: 434 PRIMOS AVENUE. FOLCROFT, PA 19032

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

13. _____
(Signature of Director or Officer listed in number 12 of the application)

14. MICHAEL GERACE, President
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JANUARY 29, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

M. GERACE ENTERPRISES, 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.

Pedro A. Cortes

Secretary of the Commonwealth

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TALLAHASSEE, FLORIDA

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