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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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09 APR -7 PH 1:20

COVER LETTER

	n of Corpora	itions			
SUBJECT:	Demrex	Industrial	Service	es, Inc.	
_		(Name of co	orporation -	must include suffi	ix)
Dear Sir or Ma	dam:				
	Existence," a				asact Business in Florida," renced foreign corporation to
Please return al	l correspond	ence concerning thi	s matter to	the following:	
Barry P	ortnoy				
	•••	(1	Name of Pe	rson)	
Demrex I	ndustria	l Servies,	Inc.		
		(I	Firm/Compa	iny)	
1300 Ind	ustrial	Blvd. Unit	5		
			(Address)	
Southamp	ton, PA	18966			
		(Cit	y/State and	Zip code)	
For further info	rmation cond	erning this matter,	please call:		
Barry Po	rtnoy	at (215	953-8500	
(Name	of Person)		(Area Cod	e & Daytime Tele	phone Number)
New Fi Divisio Clifton 2661 E	ET/COURIE ling Section n of Corpora Building xecutive Cen ssee, FL 323	ter Circle		New Filing	Corporations 327
Enclosed is a ch	neck for the f	ollowing amount:			
\$70.00 Filing	; Fee 🔲 :	\$78.75 Filing Fee & Certificate of State		8.75 Filing Fee & ertified 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.

(Enter name of cor "Inc.," "Co.," "Cor	Industrial Service: poration; must include "INCORPO. p," "Inc," "Co," or "Corp.")	RATEI)," "COM						
(If name unavailab	le in Florida, enter alternate corpora	ite nam	e adopted	for the purpose o	f transac	cting busine	ss in Flo	rida)	
	County, Pennsylvani			818019					
(State or country u	der the law of which it is incorpora	ted)		(FEI num	ber, if a	pplicable)			
4. August		5	. <u>Pe</u>	rpetual					
(Date o	f incorporation)		(Durati	on: Year corp. w	ill cease	e to exist or	"perpetu	al")	
6				·					
— .	(Date first transacted b (SEE SECTIONS 607.1501					bility)			
71300	Industrial Blvd U	nit	5 Sou	thampton,	PA	18966			
	(Principal of	ffice ad	ldress)						
1300 Ii		nit.		thampton,	PA	18966			
	(Current ma	iling ad	ldress)				377	09	
								<u> </u>	,
8	of corporation authorized in home s	tate or (country to	he carried out in	etate of	Florida)	<u> </u>	70	d
						rioriua	SS	-7	alam tu
9. Name and street :	address of Florida registered age	nt: (P.	O. Box 1	NOT acceptable)			P	1
Name:	Anthony Cavallo						m (0		i i ii
Office Address:	3230 Seagrape Road						읈기	2	To the same of
Office Address:							54	Ö	
,	Lantana		, F	lorida 33462 (Zip co	<u> 379:</u>	3	,,,,		
	(City)			(Zip co	de)				
designated in this ap further agree to con	at's acceptance: I as registered agent and to accept the application, I hereby accept the apply with the pravisions of all staits and accept the obligations of Registered agent's significant and accept the obligations of the angle of the obligations of the accept the a	ppoint atutes f my p	ment as r relative to osition as	egistered agent the proper and	and ag	eree to act	in this c	apacii	tv. I

under the law of which it is incorporated.

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

	Barry Portnoy	
_	1300 Industrial Blvd Unit 5	
ress:	Southampton, PA 18966	
Chairm	an:	
ress:		
ctor:		
ctor:		0.9
		AR PR
		SSE T
- OFFIC	ERS	PH I:
dent: _		20 RIOÁ
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Preside	nt;	
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tary: _		
:ss:		
шгет: _		
ess:		
TE: If	necessary, you may attach an addendum to the application listing additional officers a	and/or directors.
1 1	(Signature of Director or Officer listed in number 12 of the application)	
В	(Typed or printed name and capacity of person signing application)	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

09 APR - 7 PH 1:20

MARCH 18, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DEMREX INDUSTRIAL SERVICES, 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: 7950188-1

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