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	Account Name : C T CORPORATION SYSTEM		
	Account Number : FCA00000023		
	Phone : (850)222-1092 Fax Number : (850)870-5368	ORIDA ATIVAS	

FOREIGN PROFIT/NONPROFIT CORPORATION

Interstate Road Management Corporation

Certificate of Status	0
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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. Interstate Road Management Corporation

(Enter name of corporation; must include "INCORPO	RATED,"	"COMPA	אץ." יכס	RPORATIO	אכ"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	• •	,	•	•	

n/a

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Pennsylvania		3.	23-2326583
State or country unde	r the law of which it is incorporated)		(FEI number, if applicable)
11/2/1984		5.	perpetual
(Date of in	(corporation)		(Duration: Year corp. will cease to exist or "perpetual
upon qualification			
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	:54 ii 17.1	a Florids, if prior to registration) 102, F.S., to determine penalty liability)
322 Rocky Road, PO	Box 188. Hazicton, PA 1920)		
	(Principal office	add	TESE)
322 Rocky Road, PO	Box 188, Hazleton, PA 19201		
	· (Current mailing	add	ress)
			· Es
(Purpose(s) of a	corporation authorized in home state of	3 r co	untry to be carried out in state of Florida)
Name and street add	icess of Florida registered agent: (P.C	, Box <u>NOT</u> acceptable)
Name:	C T Corporation System		
lice Address:	1200 South Pine Island Road		ORDE
	Planation		- Florida 33324
	(City)		

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.

C T Corporation System MARGARET E. ROUTZAHN Special Assistant Secretary 9y; narau Remistered 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:

PLAINE - MONTY SHARE'T Sy ayap contain

A. DIRECTORS

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Cheinnan:	<u></u>	
Address:		-
Vice Chairman:		-
Address:		-
Director: PAUL DE Angelo		-
Address: <u>322 Kocky Road</u> Hazleton, PA 18201	<u></u>	-
Director: NEAL DEANGELO	2009 (SEU: ALLI,	-
Address: 322 ROCKY Road HAZLELON, PA 18201	OCT 16 RELARY AHASSE	
B. OFFICERS	PM 12: E, FLOR	- ' [77]
Address: 322 ROCKY ROAD	22: 08 DRIDA	
HAZLEDDU PA 18201		-
Vice President;		-
		-
Address: 323 ROCKY ROAD HAZLETON PA 18001	······································	-
Tronsurer: NEAL DE AUGELO		
Address: 322 ROCKY ROAD, THAZLEDN, PA 18001		-
NOTE: Unteressory, 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. NFAL DEALBER SECRETARY (TREASURER		
14. <u>NHAL DEPEDELO JECTETHEY (TELETING</u> (Typed or printed name and capacity of person signing application)		 · .

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 15, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING

I DO HEREBY CERTIFY THAT,

INTERSTATE ROAD MANAGEMENT CORPORATION

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. σ

PH 12: 08

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Contis

Secretary of the Commonwealth

Certification Number: 5363743-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp

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