

FI1000002476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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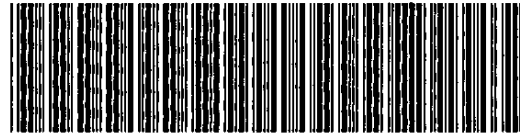
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JUN 15 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EMCON ASSOCIATES, 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," or "Certificate of Good Standing" 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:

GINO RICCA

Name of Person

EMCON ASSOCIATES, INC.

Firm/Company

74 BRICK BLVD, STE 102

Address

BRICK, NJ 08723

City/State and Zip code

gricca@emconfm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GINO RICCA

Name of Person

at (732) 920-5400 EXT 210

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

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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. EMCON ASSOCIATES, INC.

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

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

2. NEW JERSEY

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

3. 22-2843969

(FEI number, if applicable)

4. 8/31/1987

(Date of incorporation)

5. PERPETUAL

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

6. 6/1/11

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

7. 74 BRICK BLVD, BRICK, NJ 08723

(Principal office address)

74 BRICK BLVD, BRICK, NJ 08723

(Current mailing address)

8. FACILITIES SUPPORT SERVICES

(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: INCorp SERVICES, INC.

Office Address: 17888 67TH COURT NORTH

LOXAHATCHEE

(City)

, Florida 33470

(Zip code)

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.

[Signature] on behalf of InCorp Services, Inc.
(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: MICHAEL COCUZZA

Address: 74 BRICK BLVD
BRICK, NJ 08723

Vice Chairman: MICHAEL MICHOWSKI

Address: 74 BRICK BLVD
BRICK, NJ 08723

Director: MICHAEL COCUZZA

Address: 74 BRICK BLVD
BRICK, NJ 08723

Director: MICHAEL MICHOWSKI

Address: 74 BRICK BLVD
BRICK, NJ 08723

B. OFFICERS

President: MICHAEL COCUZZA

Address: 74 BRICK BLVD
BRICK, NJ 08723

Vice President: MICHAEL MICHOWSKI

Address: 74 BRICK BLVD
BRICK, NJ 08723

Secretary: _____

Address: _____

Treasurer: CHARLES BOEDDINGHAUS

Address: 74 BRICK BLVD, BRICK, NJ 08723

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SECRETARY OF STATE

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

13.  CFO + Treasurer

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. CHARLES BOEDDINGHAUS, TREASURER

(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
SHORT FORM STANDING**

EMCON ASSOCIATES, INC.

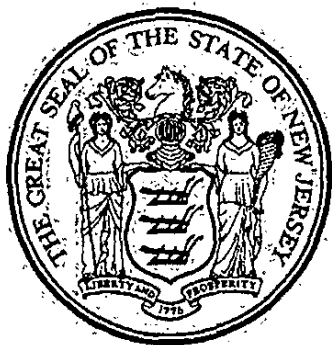
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on August 31, 1987.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Emcon Associates, Inc.
74 Brick Blvd.
Brick, NJ 08723*



Certification# 120578533

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
Official Seal at Trenton, this
27th day of May, 2011

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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