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COVER LETTER

TO: New Filir Division of	ng Section of Corporations		
SUBJECT: AN	ITOS ENVIRONMENTAL, INC.		
	Name of corpora	tion - must include suffix	
Dear Sir or Mada	n:		
"Certificate of Ex	plication by Foreign Corporation istence," or "Certificate of Good foreign corporation to transact bu	Standing" and check are sub	
Please return all c	orrespondence concerning this ma	atter to the following:	
ERICA LINDO			
	Name	of Person	
ANNUAL REGIST	TRATION MANAGEMENT SERVI	CES, LLC	
	Firm/C	Company	
3675 CRESTWOO	D PARKWAY, STE 350		
	A	ddress	
DULUTH, GA 300	96		
	•	te and Zip code	
ELINDO@ANNU.	ALREGISTRATION.COM	16 64	
	E-mail address: (to be us	sed for future annual report i	notification)
For further inform	nation concerning this matter, plea	ase call:	
ERICA LINDO	. 877	275-2767	
Name of	at (rea Code & Daytime Teleph	one Number
Name of	i cisoti — Ai	rea code de Baytime Teleph	one rumber
New Filin Division of Clifton B 2661 Exe Tallahass	of Corporations	MAILING A New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
⊠ \$70.00 Filing	-	□ \$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.

	orporation; must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	ED,	COMPANY, CORPORATION,		
(If name unavails	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busing	iness in I	Florida)
DELAWARE		3.	46-3623951		
(State or country	under the law of which it is incorporated)		(FEI number, if applicable	;)	
08/06/2013		5.	PERPETUAL		
(Date	of incorporation)		(Duration: Year corp. will cease to exist	or "perp	etual")
-			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
	`		• • •		
3809 WEST CHE	STER PIKE, STE 210 NEWTOWN SQU	ARI	E, PA 19075		
3809 WEST CHE	ESTER PIKE, STE 210 NEWTOWN SQU (Principal office				
		addı	ress)		
. 10 11 11	(Principal office	addi JAR	ress) E, PA 19073		
3809 WEST CH	(Principal office ESTER PIKE, STE 210 NEWTOWN SQU	addi JAR addi	ress) E, PA 19073		
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3809 WEST CH	(Principal office ESTER PIKE, STE 210 NEWTOWN SQU (Current mailing POLLUTION REMOVAL FOR HOSPITA	addi addi addi ALS	ress) E, PA 19073 ress) nuntry to be carried out in state of Florida)	SEC	13 0
3809 WEST CH	(Principal office ESTER PIKE, STE 210 NEWTOWN SQU (Current mailing POLLUTION REMOVAL FOR HOSPITA) of corporation authorized in home state of	addi addi addi ALS	ress) E, PA 19073 ress) nuntry to be carried out in state of Florida)	SECRETA TALLAHAS	13 OCT -
WASTE AND I (Purpose(s) Name and street	(Principal office ESTER PIKE, STE 210 NEWTOWN SQU (Current mailing POLLUTION REMOVAL FOR HOSPITA) of corporation authorized in home state of the address of Florida registered agent:	addi addi addi ALS	ress) E, PA 19073 ress) nuntry to be carried out in state of Florida)	SECRETARY O TALLAHASSEE	13 OCT -4 AI
WASTE AND I (Purpose(s	(Principal office ESTER PIKE, STE 210 NEWTOWN SQU (Current mailing POLLUTION REMOVAL FOR HOSPITA) of corporation authorized in home state of address of Florida registered agent: NRAI Services, Inc.	addi addi addi ALS	ress) E, PA 19073 ress) nuntry to be carried out in state of Florida)	SECRETARY OF STATE TALLAHASSEE FLORIDA	13 OCT -4 AM 7: 3

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.

NRAI Services, Inc.

By: Zlan Classick
(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: GRAEME CROTHALL 3809 WEST CHESTER PIKE, STE 210 NEWTOWN SQUARE, PA 19073 Vice Chairman: Address: _____ Address: **B. OFFICERS** President: GRAEME CROTHALL -3809 WEST CHESTER PIKE, STE 210 NEWTOWN SQUARE, PA 19073 Address: Vice President: Secretary: Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Thomas moses

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.

THOMAS MORSE - CHIEF FINANCIAL OFFICER

ANTOS ENVIRONMENTAL, INC.

OFFICERS:

Graeme Crothall

Chief Executive Officer/President 3809 West Chester Pike, Suite 210 Newtown Square, PA 19073

Michael Bailey

Chief Operating Officer 3809 West Chester Pike, Suite 210 Newtown Square, PA 19073

Thomas Morse

Chief Financial Officer 3809 West Chester Pike, Suite 210 Newtown Square, PA 19073

13 OCT -4 AM 7: 35
SECRETARY OF STATE
SECRETARY OF STATE

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ANTOS ENVIRONMENTAL, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF

SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANTOS ENVIRONMENTAL, INC." WAS INCORPORATED ON THE SIXTH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE NOT BEEN ASSESSED TO DATE.

13 OCT -4 AM 7: 35
SECRETARY OF STAFE
TALLAHASSEE FLORIDA

5379429 8300

131142457

AUTHENTY CATION: 0775489

DATE: 09-30-13

You may verify this certificate online at corp.delaware.gov/authver.shtml