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Certified Copies	Certificates of	f Status
Special Instructions to Filing	g Officer:	
W44-303	27 —	_

Office Use Only



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05/12/14--01037--011 **78.75

SECRETARY OF STATE

APPROVEL FILED



COVER LETTER

TO: New Filing Section Division of Corpo			
·		nces Corporatio	n
Souszer.		tion - must include suffix	
Dear Sir or Madam:			
	or "Certificate of Good	for Authorization to Transa Standing" and check are subsiness in Florida.	
Please return all correspor	dence concerning this ma	atter to the following:	
Stephen Macie	jewski		
	,	of Person	
Navmar Applied	d Sciences Cor	poration	
05.11.01.15		Company	
65 W. Street Ro			
Warminster, PA		idress	
	·	e and Zip code	
stephenmaciejew			
For further information co	•	ed for future annual report	nonneation)
Stephen Maciej	ewski "215	、675-4900 x2	226
Name of Person			one Number
New Filing Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 3	n rations enter Circle	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2014

STEPHEN MACIEJEWSKI 65 W. STREET ROAD, BLDG. C WARMINISTER, PA 18974

SUBJECT: NAVMAR APPLIED SCIENCES CORPORATION

Ref. Number: W14000030307

We have received your document for NAVMAR APPLIED SCIENCES CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

The name and title of the person signing the document must be noted beneath or opposite the signature.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 214A00010298

www.sunbiz.org

Division of Communities D.O. DOV 6297 Tallahaggas Florida 2221



19 June 2014

Florida Department of State New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

We regret that an error was made in the initial business application submitted on 5/8/14. The new enclosed application reflects corrected lines 13 and 14 (Signature and printed name). As of 19 June 2014 no customers or monies have been exchanged for services at this location. The delay in the application for a business license was due to modifications in the office Air Conditioning System (to be completed July 2014) at the site as well as advertising to a very small niche of international clientele. In addition, a long term contract as well as ITAR Compliance and licensing from the State Department is required. We look forward to conducting our first business transaction with customers and estimate the first customer for our P-3 Flight Simulator to be Fall 2014.

Check # 70412 in the amount of \$78.75 was sent with the initial application and has been cashed by your office.

Should you have any questions or require further information, please do not hesitate to contact Mr. Brett Borrmann at 904-423-0927 ext 221.

Sincerely,

Ms. Dawn Gruttadauria Accounts Payable Manager

(215) 675-4900 x226

SECRETARY OF STATE



4.20

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	Applied Sciences Corpora corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Florida)
Pennsylv	/ania 3	23-2054431	
	under the law of which it is incorporated)	(FEI number, if applicable)	
October	1977 5.	Perpetual	
. (Date	of incorporation)	(Duration: Year corp. will cease to exist o	r "perpetual")
January-	2013 N/A		
		n Florida, if prior to registration) 502, P.S., to determine penalty liability)	
65 W. Str	eet Road, Bldg. C Warmin	•	
·	(Principal office add		
7254 Gold	den Wings Road, Bldg. 2, U	nit 1 Jacksonville, FL 3224	44
	(Current mailing add	ross)	
Engineer	ing Services		700 7
(Purpose(s	s) of corporation authorized in home state or co	ountry to be carried out in state of Plorida)	FC: F
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	HE A
Name:	Brett Borman		O P
ffice Address:	7254 Golden Wings Road, Bidg. 2, U	init 1	JUN 20 PM 4: 0 ECRETARY OF STATE LAHASSEE, FLORIC
	Jacksonville	Florida 32244	宣帝 9
	(Clty)	(Zip code)	

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.

APPROVEL AND FILED

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

A. DIRECTORS	14 JUN 20 PM 4:01
Chairman: Fred Wahler	
Address: 65 W Street Road, Bldg C Warminster, PA 18974	SECRETARY OF STATE TAILAHASSEE, FLORIDA
Vice Chairman: N/A	
Address:	
Director: Thomas Fenerty, President / CEO	
Address: 65 W Street Road, Bldg C Warminster, PA 18974	
Director: Anthony Madera	
Address: 65 W Street Road, Bldg C Warminster, PA 18974	
B. OFFICERS President: Thomas, Fenerty, President / CEO Address: 65 W Street Road, Bldg. C Warminster, PA 18974	
Vice President: Harry Koper, Vice President	
Address: 65 W Street Road, Bldg. C Warminster, PA 18974	
Secretary: Robert Bauder, Secretary	
Address: 65 W Street Road, Bldg. C Warminster, PA 18974	
Robert Bauder, Secretary	
Address: 65 W Street Road, Bldg. C Warminster, PA 18974	
NOTE: If necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirm are true and that he or she is aware that false information submitted in a document to the Da third degree felony as provided for in s.817.155, FS. Anthony Madera, Director	
(Typed or printed name and capacity of person signing application	n)

APPROVEL AND FILED

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 14 JUN 20 PM 4:01

APRIL 9, 2014

SECRETARY OF STATE TALLAHASSEE. FLORIDA

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

NAVMAR APPLIED SCIENCES CORPORATION

is duly incorporated as a Pennsylvania Corporation 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.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



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

Care aile

Certification Number: 11756000-1

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