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COVER LETTER

TO:	New Filing Se- Division of Co			
SUBJ	ECT: LPI,	Inc.		
			tion - must include suffix	
Dear S	Sir or Madam:			
"Certi	ficate of Existen	tion by Foreign Corporation ce," or "Certificate of Good S gn corporation to transact bus	Standing" and check are sub-	
Please	return all corres	pondence concerning this ma	atter to the following:	
Adr	iaan DeVi	Iliers		
		Name	of Person	
LPI	, Inc.			
		Firm/C	Company	······································
500	3 Bay Sta	ite Road		
		A	ddress	
Pali	metto, FL	34221		
	- · · · · · · · · · · · · · · · · · · ·	City/Sta	te and Zip code	
ade	villiers@lpi	ny.com		
-		E-mail address: (to be us	ed for future annual report n	otification)
For fu	rther information	concerning this matter, plea	se call:	
Adr	iaan DeVi	lliers _{at (} 941	776-4717	
	Name of Perso	on Ar	ea Code & Daytime Telepho	one Number
		UDIED ADDDEGG	MATUNGA	ANDECC.
STREET/COURIER ADDRESS: New Filing Section		MAILING ADDRESS: New Filing Section		
Division of Corporations		Division of Corporations		
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314			
	Tallahassee, F		i ununusse, i i	32311
Enclos	sed is a check for	the following amount:		
57 (0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy



July 14, 2014

ADRIAAN DEVILLIERS LPI, INC. 5003 BAY STATE ROAD PALMETTO, FL 34221

SUBJECT: LPI, INC.

Ref. Number: W14000043155

We have received your document for LPI, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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 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.

Maryanne Dickey Regulatory Specialist II

www.sunbiz.org

Letter Number: 214A00015081

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

LPI, Inc.			
Enter name of corporation; must inc 'Inc.," "Co.," "Corp," "Inc," "Co," or		" "COMPANY," "CORPORATION,"	L23 F
Lucius Pitkin Inc.			PH &
(If name unavailable in Florida, enter	•	adopted for the purpose of transacting bu	isiness in Florida
NΥ	3.	13-1330690	
State or country under the law of whi		(FEI number, if applicab	ole)
11/11/1929	5.	Perpetual	
(Date of incorporation)	5.	(Duration: Year corp. will cease to exi	st or "perpetual")
After 2014 Florida R	egistration		
(Date	first transacted business i	n Florida, if prior to registration)	
•		502, F.S., to determine penalty liability)	
360 Park Avenue Sou	uth, 15th Floor	, New York, NY 10010	
	(Principal office add	ress)	
	` '		
Same as above			
Same as above	(Current mailing add	ress)	
	(Current mailing add		
Provide Consulting E	(Current mailing add	ervices)
Provide Consulting E	(Current mailing add Engineering Se porized in home state or co	ervices ountry to be carried out in state of Florida)
Provide Consulting E	(Current mailing add Engineering Se porized in home state or co	ervices ountry to be carried out in state of Florida)
Provide Consulting E (Purpose(s) of corporation authorized and street address of Florice	(Current mailing add Engineering Se porized in home state or co	ervices ountry to be carried out in state of Florida O. Box NOT acceptable))
Name and street address of Floric Name: CT Corpo	(Current mailing add Engineering Senorized in home state or collar registered agent: (P.	puntry to be carried out in state of Florida O. Box <u>NOT</u> acceptable))
Provide Consulting E (Purpose(s) of corporation authorized and street address of Florical Name: CT Corporation Appendix Appendi	(Current mailing add Engineering Senorized in home state or colla registered agent: (P. Dration Systems)	puntry to be carried out in state of Florida O. Box <u>NOT</u> acceptable))

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.

By: Debbie Diaz

(Registered agent's signature) Assistant Secretary

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								
Robert Vecchio, Ph.D., P.E.								
Address: 8 Warren St., #7 FI								
New York, NY 10007								
Chairman: Marc N Weissbach	34 7							
Address:								
	23							
Director:	PA PA							
Address:	COR C							
	37							
Director:								
Address:								
B. OFFICERS								
President: David A Greer								
Address: as above								
Vice Presidents: Alex Argento and Scott L Gwilliam and	Joseph P Crosson							
Address: all as above								
Secretary:								
Address:								
Treasurer: Stephen Ludwig								
Address: as above								
NOTE: If necessary, you may attach an addendum to the application listing additional of the application listing additional additiona	ficers and/or directors.							
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.								

Robert Vecchio - CEO

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of LPI, TNC was filed on 11/11/1929, under the name of SPARKMAN & STEPHENS, INCORPORATED, fixing the duration as perpetual, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment SPARKMAN & STEPHENS, INCORPORATED, changing its name to LPI, INC., was filed 09/30/2013.

The Biennial Statement is past due.



**

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 14th day of May two thousand and fourteen.

Executive Deputy Secretary of State