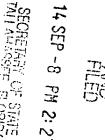
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(Rec	questor's Name)	,		
(Address)				
(Address)				
(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Doc	cument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			
	Office Use Onl	· · · · · · · · · · · · · · · · · · ·		
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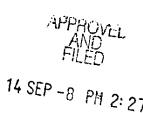
COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: LUC International, INC
Name of corporation - must include suffix
Dear Sir or Madam:
The euclosed "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: Kenneth Unish Name of Person
Name of Person
LUC INTERNATIONAL JNC. Firm/Company
19 Green Brux Drive Address
Allison Park, PA 15101 City/State and Zip code
City/State and Zip code
TCUSTANTINO OVRISH POPECK. COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (412) 391-1994 Name of Person Area Code & Daytime Telephone Number
Name of Person 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 \$\Bigcup \frac{1}{2} \\$78.75 Filing Fee & Certificate of Status \$\Bigcup \frac{1}{2} \\$78.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO.	REIGN CORPORATION I		TES, THE FOLLOWING IS SUBI TESS IN THE STATE OF FLORID	
(Enter name of a			MPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orporation; must include 114 forp," "Inc," "Co," or "Corp."	CORPORATED, CO	WIPANI," CURPURATION,	
	• • • • • • • • • • • • • • • • • • • •	•		
,			• •	
(If name unawile	phie in Florida, enter alternat	- compense same adopte	d for the purpose of transacting busin	ess in Florida)
0	r	•		
	NNGY/VANIA	3	25-169 4449 (FEI number, if applicable	
(State or country	y under the law of which it is	incorporated)	(FEI number, if applicable	30 7
. 1	0/01/1992	ς .	Depretion	S
(Date	of incorporation)	(Dura	PURPETVAL tion: Year corp. will cease to exist o	"perpetual")
•	• ,			5
		anni di La cia ca di Tita di A		
•	(SEE SECTIONS 6	07.1501 & 607.1502, F.S	a, if prior to registration) S., to determine penalty liability)	
Trans	A . A .	. ^		
Inku	DAIRWAY CINTUR, DE	41 h TICCK, 117/5	burgh, PA 15222	<u> </u>
Three	GATIWAY CENTER 2	4th HOUR Pitts	bregh, PA 15222	·
, , , ,	(Cu	rrent mailing address)	/	
Name and stree	t address of Florida registe	ered agent: (P.O. Box	NOT acceptable)	
Name:	. 1	Company of Floring		
Manre,	// .	611	A, -LC	
fice Address:	8955 FENTANA DE	1 Sol WAY		
	Nacha	,	211/g	
	(City)	······································	Florida 34109 (Zip code)	
	, (City)		(Zip code)	
Registered age	nt's acceptance:			
			rocess for the above stated corpo	
			registered agent and agree to a	
			to the proper and complete perf osition as registered agent.	ormance of my
		1	1	
	\checkmark	H1	/_ ()	•
	Men	wh	- //	
	/D ~/	gistered agent's signature	,	
	(VC)	Provence afont a signature	<i>!</i>	

10. 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.



11. Names and business addr	esses of officers and	Vor directors:
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A. DIRECTORS	3 in 2:27
	SECRETAN) OF STATE
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Kenneth URish	
19 GREEN BRISE DOING	
Address: Park PA ICINI	
AIIISON TAKK TA 13101	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer: ANN VAIS'H	1
	Sin Park, PA 15101
1/	1
NOTE: If necessary, you may attach an addendum to the	he application listing additional officers and or directors.
12. Signature of	Dispator or Officer
The officer or director signing this document (and who	Director or Officer is listed in number 12 above) affirms that the facts stated herein
are true and that he or she is aware that false informatio a third degree felony as provided for in s.817.155, F.S.	n submitted in a document to the Department of State constitutes
	ish, President

COMMONWEALTH OF PENNSYLVANTAED DEPARTMENT OF STATE 4 SEP -8 PM 2: 27 SEPTEMBER 2, 2014 SECRETARY OF STATE TALL AND SECRETARY OF STATE

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

LUC INTERNATIONAL, INC.

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

Certification Number: 12083994-1