

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850) 205~8842 : (850)878-5368 Fax Number

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Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

I.S.G. Office Concepts, Inc.

Certificate of Status	1
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JUL 2 4 2015

7/23/2015

COVER LETTER

TO: New Divis	Filing Secti	on omtions			
SUBJECT:	•	Concepts, Inc.			
SOPIECT		Name of	corporatio	n - must include suffix	
Dear Sir or M	ladam:				
"Certificate o	f Existence	on by Foreign Corp." or "Certificate of corporation to tra	f Good Sta	Authorization to Transac nding" and check are sub- ess in Florida.	et Business in Florida," mitted to register the
Please return	all correspo	ndence concernin	g this matte	r to the following:	
James D. Ham	uscin				
······································			Name of	Person	
ISG Office Co	ncepus, lnc.				
			Flrm/Co	npany	
700 Enterprise	Road				
	·		Add	CSS CSS	
Horsham, PA	19044				
			City/State	and Zip code	
accounting@a	ncillare.com			<u></u>	
		E-mail address:	(to be used	for future annual report r	otitication)
For further in	formation o	oncerning this ma	tter, please	cali:	
James D. Hani	u s cin	g	215	699-1700 ext 135	
Nam	e of Person	<u> </u>	Area	699-1700 ext 135 Code & Daytime Telepho	one 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 Tallahassec, FL 32314		
Enclosed is a 570.00 Fil		he following amou \$78.75 Filing Certificate of	Fee &	S78.75 Filing Fee & Certified Copy	S \$87.50 Filing Pee, 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.

(Enter name of co	orporation; must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	ZD," '	COMPANY," "CORPORATION,"	
(If name unavails	uble in Florida, entar alternate corporate na	me ad	opted for the purpose of transacting busi	ness in Florida)
2. Pennsylvania		, 2	3-2367494	
(State or country	under the law of which it is Incorporated)	· J. —	(FEI number, if applicable	<u> </u>
September 20, 1	985	, ۱	erpetual	
(Date	985 of incorporation)	J. (Duration: Year corp. will cease to exist	or "perpetual")
6. June 22, 2015				
··	(Date first transacted busine (SEE SECTIONS 607.150) & 60	ss in 1 7.150	lorida, if prior to registration) 2, F.S., to determine penalty liability)	
7. 700 Enterprise Re	oad, Horsham, PA 19044			
·· 	(Principal office	addre	s)	
700 Enterprise R	oad, Horsham, PA 19044			ZK 5
	(Current mailing	eddre	\$}	FR E
	agle individual for administrative services			TAL HASS
(Purpose(s) of corporation authorized in home state (or cou	try to be carried out in state of Plorida)	E E
9. Name and stree	et address of Florida registered agent:	(P.O.	Box NOT acceptable)	
Name:	CT Corporation System		_	7: 39 FLORID
Office Address:	1200 South Pine Island Road		_	D.
	Plantation		, Florida 33324 (Zip code)	
	(City)		(Zip code)	
Having been nam designated in this further agree to c	gent's acceptance: ned as registered agent and to accept : application, I hereby accept the appromply with the provisions of all statu amiliar with and accept the obligation	tervic pintm tes re ns of	e of process for the above stated coint as registered agent and agree to alive to the proper and complete pe my position as registered agent.	act in this capacity. I reformance of my
By:	C T Corporation System		Jembr Unal	Jentier Vincent Vice President & Assistant Secretary
y			/!	

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:
Address:
Vice Chairman:
Address:
Director:
Address:
Director: For 5
Address:
2 2 P
B. OFFICERS
President: Joanne Santomauro
Address: 700 Emerprise Road, Horsham, PA 19044
<u> </u>
Vice President:
Address:
Secretary: Frank Santomauro
Address: 700 Enterprise Road, Horsham, PA 19044
Tressurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13(X) -) // -
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. Joanne Santomsuro President
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

JULY 23, 2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

I.S.G. OFFICE CONCEPTS, INC.

Is duly incorporated as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting 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

Pedro C. Contés

Certification Number: 12810634-1

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