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SECRETARY OF STATE
CLIAHASSEE. FLORIDA

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### **COVER LETTER**

TO.				
TO:	Registration Section Division of Corporations			
GIID.	Suburban Corp.			
SUD		e of corporation - n	ust include suffix	
Dear S	Sir or Madam:			
"Certi	nclosed "Application by Foreign of ficate of Existence," or "Certificate referenced foreign corporation to	ite of Good Standin	g" and check are subm	
	e return all correspondence concer ew T. Blackshear, Esq.	rning this matter to	the following:	
		Name of Per	son	
Shutts	& Bowen LLP			
		Firm/Compar	iy	
4301	W. Boy Scout Blvd., Suite 300			
		Address		
Tampa	a, Florida 33607			
		City/State and 2	Zip code	
mblac	kshear@shutts.com			
	E-mail addre	ess: (to be used for	future annual report no	tification)
For fu	rther information concerning this	matter, please call:		
Matth	ew T. Blackshear, Esq.	813	227-8110	
	Name of Person	_ at () Area Code	Daytime Telepho	one Number
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_u,	
	STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:	MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Enclos	sed is a check for the following an	nount:		
<b>5</b> \$7	0.00 Filing Fee		78.75 Filing Fee & ertified 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.

under the law of which it is incorporated.

(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of trans	gating business in Florida)	_	
Pennsylvania		22-1549950	acting business in Piorida)		
2. (State or country under the law of which it is incorporate  12/07/1953  (Date of incorporation)  08/30/2012		3. (FEI number, if applicable)  5. (Date of duration, if other than perpetual)			
8. Name and stree	(Current mailir	ng address, if different)  D. Box NOT acceptable)	2915 OCT	-	
Name:	Matthew T. Blackshear, Esq., Shutts & Bov 4301 W. Boy Scout Blvd., Suite 300	ven	TARY ASSE		
Office Address:	Tampa	33607 , Florida	A 9. P. F. LOI		
	(City)	(Zip code)	02 RID		
designated in this further agree to co	ent's acceptance: ed as registered agent and to accept servi application, I hereby accept the appoint omply with the provisions of all statutes r amiliar with and accept the obligations o	nent as registered agent and elotive to the proper and co	l agree to act in this cape mplete performance of n	acity.	

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_ Vice Chairman: Address: Robert Cronheim Director: 205 Main Street, Chatham, New Jersey 07928 Address: Daniel D. Cronheim Director: 205 Main Street, Chatham, New Jersey 07928 Address: \_ **B. OFFICERS** Robert Cronheim President: 205 Main Street, Chatham, New Jersey 07928 ڡؚ Address: \_ Daniel D. Cronheim Vice President: 205 Main Street, Chatham, New Jersey 07928 Address: \_ Paula A, D'Amato Secretary: 205 Main Street, Chatham, New Jersey 07928 Treasurer: Address: NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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 Cronheim, President

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## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 10/13/2015

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### SUBURBAN CORP.

is duly registered 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

Certification Number: TSC151013161673-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx