

File 000 000078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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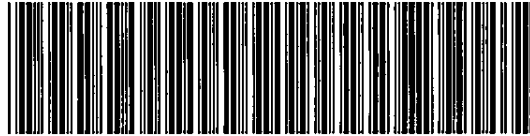
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/16/15--01030--016 **78.75

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16 JAN -7 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 07 2016
J SHIVERS

64)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2015

MATTHEW STRAUB
9953 BROADWAY ST
IRWIN, PA 15642

SUBJECT: W. BAKER MANAGEMENT, INC.
Ref. Number: W15000075246

We have received your document for W. BAKER MANAGEMENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 515A00024216

COVER LETTER

TO: Registration Section
Division of Corporations
W. BAKER MANAGEMENT, INC.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "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:
MATTHEW STRAUB

Name of Person
W. BAKER MANAGEMENT, INC.

Firm/Company
9953 BROADWAY ST

Address
IRWIN, PA 15642

City/State and Zip code
MSTRAUB@IRWINCAR.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATTHEW STRAUB 724 864-8900

Name of Person at () _____
Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

**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.*

W. BAKER MANAGEMENT, INC.

1. _____

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
PENNSYLVANIA 47-3871166

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4/27/2015 PERPETUAL

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
1/1/16

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

9953 BROADWAY ST, IRWIN PA15642

7. _____
(Principal office address)

9953 BROADWAY ST, IRWIN PA 15642

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

WILLIAM M STANTON

Name: _____

201 N. FRANKLIN STREET SUITE 2000

Office Address: _____

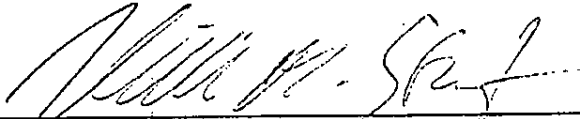
TAMPA

33602

_____, Florida _____
(City) (Zip code)

9. Registered agent's acceptance:

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)

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.

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16 JAN - 7 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

WILLIAM BAKER

Chairman:

19 CHURCHILL RD

Address:

PITTSBURGH, PA 15235

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

WILLIAM BAKER

President:

19 CHURCHILL RD

Address:

PITTSBURGH, PA 15235

Vice President:

Address:

MATTHEW J. STRAUB

Secretary:

3042 SWANSEA CRES. W, ALLISON PARK, PA 15101

Address:

WILLIAM BAKER

Treasurer:

19 CHURCHILL RD, PITTSBURGH, PA 15235

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.

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.

MATTHEW J. STRAUB

13.

(Typed or printed name and capacity of person signing application)

16 JAN - 7 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

01/07/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

W. Baker Management, Inc.

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.

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SECRETARY OF STATE
TREASURER
FLORIDA



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

Pedro A. Contes

Secretary of the Commonwealth

Certification Number: TSC160107100238-1

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