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**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Bar-Ray Products, Inc.**

Certificate of Status	0
Certified Copy	0
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D. SCOTT

SEP 28 2016

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**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.*

1. Bar-Ray Products, Inc.  
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Pennsylvania 3. 11-0508873  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 19, 1993 5. \_\_\_\_\_  
 (Date of incorporation) (Date of duration, if other than perpetual)

6. October 1, 2016  
 (Date first transacted business in Florida, if prior to registration)  
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 90 East Lakeview Drivg. Littlestown, PA 17340  
 (Principal office address)

SAME AS ABOVE  
 (Current mailing address, if different)

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

Name: W. Bradley Munroe, Esq.

Office Address: 239 E. Virginia Street  
Tallahassee, Florida 32301  
 (City) (Zip code)

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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.*

W. B. Munroe  
 (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.

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

**A. DIRECTORS**

Chairman: Jeffrey M. Stein  
Address: 90 East Lakeview Drive  
Littlestown, PA 17340

Vice Chairman: N/A  
Address:

Director: Jeffrey M. Stein  
Address: 90 East Lakeview Drive  
Littlestown, PA 17340

Director: Mary C. Stein  
Address: 90 East Lakeview Drive  
Littlestown, PA 17340

**B. OFFICERS**

President: Jeffrey M. Stein  
Address: 90 East Lakeview Drive  
Littlestown, PA 17340

Vice President: N/A  
Address:

Secretary: Mary C. Stein  
Address: 90 East Lakeview Drive, Littlestown, PA 17340

Treasurer: Mary C. Stein  
Address: 90 East Lakeview Drive, Littlestown, PA 17340

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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.

13. Mary C. Stein, Secretary  
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

09/06/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

BAR-RAY PRODUCTS, 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.



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. Contis*  
Secretary of the Commonwealth

Certification Number: TSC160906100486-1

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

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