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(Requestor's Name)

(Address)

(Address)

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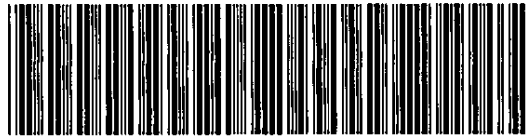
(Business Entity Name)

(Document Number)

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*Serving the Legal Community for Over 100 Years . . . Registered Agents in Every State*

**JAMES A. CURRAN**  
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## Corporation Guarantee and Trust Company

TWO GREENWOOD SQUARE, SUITE 110  
3331 STREET ROAD, BENSALEM, PA 19020  
TELEPHONES: (800) 563-6131 • (215) 633-8144  
FAX (215) 633-8160  
E-MAIL: info@cgtco.com

July 8, 2016

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314


**RE: S. T. HUDSON INTERNATIONAL INC.**

Dear Sir or Madam:

Enclosed is duplicate Application for Authority of the above company for filing with your office, together with Certificate of Good Standing and our \$78.75 check to cover filing fees.

Please send your usual acknowledgment and receipt to this office when the filing has been completed. Thank you.

Cordially yours,

  
Joseph J. Collopy  
Vice-President

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 JUL 13 P 1:00

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JJC/mag  
Enclosures

**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.*

S. T. HUDSON INTERNATIONAL 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)

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

4. May 26, 1981 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 900 Dudley Avenue, Cherry Hill, NJ 08002  
\_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Edwin F. Blanton  
\_\_\_\_\_

Office Address: 610 Summerbrooke Drive  
\_\_\_\_\_

Tallahassee, Florida 32312  
\_\_\_\_\_  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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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.*

  
\_\_\_\_\_  
(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: Robert S. Hudson  
900 Dudley Avenue  
Address: Cherry Hill, NJ 08002

Vice Chairman: David M. Pharis  
9000 Dudley Avenue  
Address: Cherry Hill, NJ 08002

Director: Robert G. Willauer  
900 Dudley Avenue  
Address: Cherry Hill, NJ 08002

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Robert S. Hudson  
900 Dudley Avenue  
Address: Cherry Hill, NJ 08002

Vice President: Robert G. Willauer  
900 Dudley Avenue  
Address: Cherry Hill, NJ 08002

Secretary: Robert S. Hudson  
900 Dudley Avenue, Cherry Hill, NJ 08002  
Address: \_\_\_\_\_

Treasurer: Robert S. Hudson  
900 Dudley Avenue, Cherry Hill, NJ 08002  
Address: \_\_\_\_\_

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

12. \_\_\_\_\_

*Robert S. Hudson*

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. \_\_\_\_\_

Robert S. Hudson President

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

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

07/08/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

S. T. HUDSON INTERNATIONAL 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. Contes*

Secretary of the Commonwealth

Certification Number: TSC160708110592-1

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