F16000005402

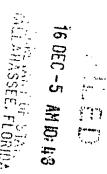
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2016

KATHLEEN BOWERS 7451 KEEBLER WAY ALLENTOWN, PA 18106

SUBJECT: SHARP CORPORATION

Ref. Number: W16000078055

2016 DEC -5 AM II 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SHARP CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 716A00024840

Please See The ATTACHED CERTIFICATE

Any avestions, please call me: 610.239-6633

Thank you,

Kathy Bowers

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO:	Registration S Division of C					
SUBJ	ECT: Sharp C	Corporation				
		Name	of corporation	n - mus	st include suffix	
Dear S	Sir or Madam:					
"Certi	ficate of Exister		te of Good Sta	anding"	and check are sub	ct Business in Florida," omitted to register the
Please	return all corre	spondence concer	ning this matt	er to the	e following:	
Kathle	en Bowers					
			Name o	f Person	า	
Sharp	Corporation					
			Firm/Co	mpany		
7451 k	Keebler Way					
			Add	ress		
Allente	own, PA 18106					
			City/State	and Zip	code	
kathy.1	oowers@sharpser	vices.com, melissa.	supczenski@uc	ghealth	care.com	
		E-mail addre	ss: (to be used	for fut	ure annual report i	notification)
For fu	rther informatio	n concerning this	matter, please	call:		
			610 at (239-6633		
Name of Person			Area Co	<i>)</i>	Daytime Telep	hone Number
	Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle	SS:		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Enclos	sed is a check fo	or the following an	nount;			
Ø \$70	0.00 Filing Fee	□ \$78.75 Fili Certificate			.75 Filing Fee & lified 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.

1. Sharp Corpora	tion			
	corporation; must include "INCORPORA" Corp," "Inc," "Co," or "Corp.")	ΓED,"	"COMPANY," "CORPORATION,"	
Sharp Packagii	ng Solutions			
(If name unavai	lable in Florida, enter alternate corporate r	ame a	dopted for the purpose of transacting business in Florida	ι)
2. Pennsylvania		3	23-1989163	
	ry under the law of which it is incorporate	J. d)	(FEI number, if applicable)	
February 18, 19	976	5		
··	e of incorporation)	_	(Date of duration, if other than perpetual)	_
6.				
7. <u>7451 Keebler W</u>	ay, Allentown, PA 18106 (P	rincip	al office address)	_
	(Current i	nailin	g address, if different)	
8. Name and <u>stre</u> Name:	et address of Florida registered agent: C T Corporation System	(P.O	. Box NOT acceptable)	16 DEC _ 0
Office Address:	1200 South Pine Island Road		17 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -	•
	Plantation		, Florida 33324 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	(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.

C T Corporation System

James M. Halpin
Assistant Secretary

(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: See Attached Address: _ Vice Chairman: Address: ___ Address: __ **B. OFFICERS** President: See Attached Address: ____ Vice President: Address: Secretary: __ 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. 13. David Thomson

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

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 12/01/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SHARP CORPORATION

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: TSC161201110700-1

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

Sharp Packaging Solutions



7451 Keebler Way, Allentown, PA 18106 23 Carland Rd., Conshohocken, PA 19428 Phone: 610-395-5800

www.sharpservices.com

Michael O'Hara	7451 Keebler Way	Allentown	PA	18106
President	Street Address	City	State	ZIP
Jeffrey A. Benedict	7451 Keebler Way	Allentown	PA	18106
Sr. Vice President - Global Business Development	Street Address	City	State	ZIP
Richard L. Seibert	7451 Keebler Way	Allentown	PA	18106
Sr. Vice President - Technology & Innovation	Street Address	City	State	ZIP
C. Douglas Hill	7451 Keebler Way	Allentown	PA	18106
Sr. Vice President - General Manager	Street Address	City	State	ZIP
Barbara H. Ost	7451 Keebler Way	Allentown	PA	18106
Vice President - Quality Assurance	Street Address	City	State	ZIP
David Thomson	7451 Keebler Way	Allentown	PA	18106
Vice President - Finance & CFO	Street Address	City	State	ZIP
David Thomson	7451 Keebler Way	Allentown	PA	18106
Secretary	Street Address	City	State	ZIP
David Thomson	7451 Keebler Way	Allentown	PA	18106
Treasurer	Street Address	City	State	ZIP

Brendan McAtamney	Magna Drive, Magna Busin	Magna Drive, Magna Business Park, Citywest Rd., Dublin 24, Ireland			
Director	Street Address	City	State	ZIP	
Michael O'Hara	7451 Keebler Way	Allentown	PA	18106	
Director	Street Address	City	State	ZIP	
Simon Hayes	Magna Drive, Magna Busin	ess Park, Citywest Ro	I., Dublin 24	I, Ireland	
Director	Street Address	City	State	ZIP	
David Thomson	7451 Keebler Way	Allentown	PA	18106	
Director	Street Address	City	State	ZIP	