

F16000005477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

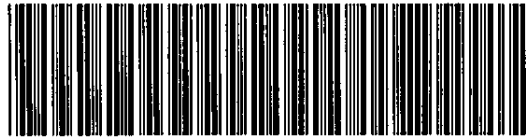
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec 12/2/16

Penalty Fees 1999
W16-13399

Office Use Only



200281802532

02/13/16--01015--013 **78.75

12/13/16--01002--018 **3050.00

FILED
2016 DEC 12 PM 2:30
FBI - WASH DC

M. MILLIGAN

DEC 13 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2016

SCHOLASTICA TRAVEL, INC.
ATTN: NATALIE RICE
601 SOUTH MAIN ST
GREENSBURG, PA 15601

SUBJECT: SCHOLASTICA TRAVEL, INC.
Ref. Number: W16000013399

We have received your document for SCHOLASTICA TRAVEL, 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):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$3,050.00.

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 916A00003748

COVER LETTER

TO: Registration Section
Division of Corporations
Scholastica Travel 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:
Natalie Rice

_____	Name of Person
Scholastica Travel Inc	
_____	Firm/Company
601 South Main Street	
_____	Address
Greensburg, PA 15601	
_____	City/State and Zip code
nrice@scholasticatravel.com	

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

For further information concerning this matter, please call:

Natalie Rice/Ann Prinkey	724	837-4600
_____	at (_____)	_____
Name of Person	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:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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*

Scholastica Travel 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 25-1433338

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
06/13/1986

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
03/1999

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S. to determine penalty/liability)
601 South Main Street Greensburg, PA 15601

7. _____
(Principal office address)

(Current mailing address, if different)

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

John B. Weir

Name: _____

1242 East Langley Court

Office Address: _____

Lake Mary

32746

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.

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

A. DIRECTORS

Chairman: Nancy Weir

601 South Main Street

Address: Greensburg, PA 15601

Vice Chairman:

Address:

Director: Natalie Rice

601 South Main Street

Address: Greensburg PA 15601

Director: John Weir

601 South Main Street

Address: Greensburg, PA 15601

B. OFFICERS

President: Ann Prinkey

601 South Main Street

Address: Greensburg, PA 15601

Vice President: Nancy Weir

601 South Main Street

Address: Greensburg, PA 15601

Secretary: John Weir

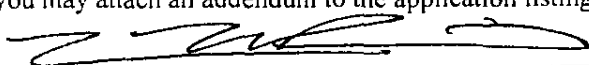
601 South Main Street, Greensburg PA 15601

Address: John Weir

Treasurer: 601 South Main Street Greensburg PA 15601

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.

13. Natalie Rice

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

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

12/07/2016

FILED
2016 DEC 12 PM 2:30
NOT RECORDED
12/13/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SCHOLASTICA TRAVEL, 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: TSC161207162292-1

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