# F17000001779

| (Requestor's Name)       |                   |             |  |  |  |
|--------------------------|-------------------|-------------|--|--|--|
| (Ad                      | dress)            |             |  |  |  |
| (Ad                      | ldress)           |             |  |  |  |
| (City/State/Zip/Phone #) |                   |             |  |  |  |
| PICK-UP                  | ☐ WAIT            | MAIL        |  |  |  |
| (Bu                      | siness Entity Nar | ne)         |  |  |  |
| (Document Number)        |                   |             |  |  |  |
| Certified Copies         | Certificates      | s of Status |  |  |  |
| Special Instructions to  | Filing Officer:   |             |  |  |  |
|                          |                   |             |  |  |  |
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Office Use Only



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734 (801)



March 3, 2017

LINDA GLASCOE 5289 POTTSVILLE PIKE READING, PA 19605

SUBJECT: EXTREME ELECTRONICS CORP

Ref. Number: W17000018337

We have received your document for EXTREME ELECTRONICS CORP 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 office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$800.00.

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.

Letter Number: 917A00004124

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

### **COVER LETTER**

| TO: Registration S Division of C  |  |  |  |  |
|---|--|--|--|--|
| SUBJECT: EXTRE  | EME ELECTRONICS CORP   |  |  |  |
| SUBJECT:  | Name of corporat   | ion - must include suffix                          |  |  |
| Dear Sir or Madam:  |  |  |  |  |
| "Certificate of Existe  | ation by Foreign Corporation face," or "Certificate of Good Sign corporation to transact bus | tanding" and check are sub-                        |  |  |
| Please return all corre   | espondence concerning this ma  | tter to the following:                             |  |  |
| ***************************************   | Name   | of Person  |  |  |
| EXTREME ELECTRO   | NICS CORP  |  |  |  |
| 5289 POTTSVILLE PI  |  | ompany   |  |  |
|   | Ad   | dress  |  |  |
| READING, PA 19605   |  |  |  |  |
|   | City/Stat  | e and Zip code                                     |  |  |
| LGLASCOE.EXTREM   | _  |  |  |  |
|   | E-mail address: (to be use   | ed for future annual report n                      | otification)   |  |
| For further information   | on concerning this matter, pleas   | se call:   |  |  |
| LINDA GLASCOE   | 610  | 781-4233   |  |  |
| Name of Per   | son at (at C   | ode Daytime Telepi                                 | none Number  |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |  | Registration Se<br>Division of Co<br>P.O. Box 6327 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tàllahassee, FL 32314 |  |
| Enclosed is a check for   | or the following amount:   |  |  |  |
| □ \$70.00 Filing Fee  | ■ \$78.75 Filing Fee & Certificate of Status   | □ \$78.75 Filing Fee & Certified Copy              | ☐ \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy                                 |  |



5289 Pottsville Pike Reading, PA 19605 610-781-4233

3/14/17

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

ATTN: JUSTIN SHIVERS

RE: Application by Foreign Corp Entity # W17000018337

Justin,

Pursuant to our telephone conversation on March 6, 2017 please note I inadvertently entered 2/1/15 on my application submitted. This was a clerical error on my part. I have corrected this error and the date business is to commence will be April 1, 2017.

I do apologize for this error and appreciate your assistance in this matter

Please do not hesitate to contact me directly at 610-781-4233 if you have any questions

Thanking you in advance.

Best regards,

LUMILITY ( LUCI)

CC: Pete Solnick Esq. Solnick Law

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My Compact of Expensions (2000)

TEMES - INSTRUMENTS (2000)

TEMES - INSTRUMENTS (2000)

### 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.

| (Enter name of ea                         | ECTRONICS CORPORATED<br>orporation, must include "INCORPORATED<br>orp." "Inc." "Co." or "Corp.")   | D." "COMPANY," "CORPORATION."  |  |
|---|--|--|--|
| EXTREME                                   |  |  |  |
| (If none mayaila                          | ble in Florida, enter alternate corporate name   | e adopted for the purpose of transacting br  | isiness in Florida)  |
| PENNSYLVAN                                | 3 A  | 47-5023561   |  |
| (State or country                         | y under the law of which it is incorporated)   | (FEI number, if applie   | able)  |
| 4. Date 4-1-17                            | of incorporation)  |  |  |
| 5289 POTTSVII                             |  | in Florida, if prior to registration)<br>1502, F.S., to determine penalty liability) |  |
| 5289 POTTSVIL                             | (Princ<br>LE PIKE, READING, PA 19605   | ipal office address)   |  |
| 8. Name and stree                         | (Current mail<br><u>address</u> of Florida registered agent: (P<br>SOLNICK LAW/PETE SOLNICK  | ling address. if different)  O. Box NOT acceptable)                                  | 17 MAR<br>SECRET<br>TALLAHA  |
| Name:                                     | SOLING K LAWFETE SOLING K  | ANTHA COUNTY & MINTY TO  | SS SS  |
| Office Address:                           | 2999 NE 191 STREET SUITE 805   |  |  |
|   | ANDANTTIDA   | . Florida (Zip code)   |  |
|   | (City)   | (Zip code)   | ALC<br>ALC<br>ALC<br>ALC<br>ALC<br>ALC<br>ALC<br>ALC<br>ALC<br>ALC |
| designated in this<br>further agree to co | ent's acceptance: ed as registered agent and to accept ser application. I herchy accept the appoin omply with the provisions of all statutes amiliar with and accept the obligations | tment as registered agent and agree t<br>relative to the proper and complete p       | $to$ act in this capacity. $T_{-}$                                 |

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: \_\_\_\_\_\_ Vice Chairman: Address. Director: Director: Addresst B. OFFICERS STEPHEN V GLASCOE President: 5289 POTTSVILLE PIKE Address: READING, PA 19605 Vice President: LINDA M GLASCOE Secretary: \_\_\_\_\_ 5289 POTTSVILLE PIKE, READING, PA 19605 LINDA M GLASCOE Treasurer: 5289 POTTSVILLE PIKE, READING, PA 19605 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) aftirms 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. LINDA M GLASCOE #SECRETARY/TREASURER

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

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 02/13/2017

#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

### **Extreme Electronics 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: TSC170213090122-1

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