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(Address)
(Address)
(City/State/Zip/Phone #)
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2017 APR -4 PK 2: 58

K. SALY APR - 5 2017

COVER LETTER

TO:		tration Second					
SUBJE			PRICE PAINTING	INC			
JUBJI	3011		Name o	of corporat	ion -	must include suffix	
Dear Si	r or M	adam:					
"Certifi	cate of	Existenc	ion by Foreign Co e," or "Certificate n corporation to tr	of Good S	standi	ng" and check are subt	t Business in Florida," mitted to register the
Please r JOSEPH			ondence concerni	ng this ma	tter to	the following:	
				Name	of Pe	rson	
JOSEPH	H PRIC	E PAINTI	NG INC				
4891 C	AMPBI	ELLS RUN	ROAD	Firm/C	Compa	ny	
PITTSE	BURGH	I PA 1520	5	Ac	ldress		
jprice@	pricein	dustries.us		City/Stat	e and	Zip code	
			E-mail address	: (to be us	ed for	future annual report n	otification)
For furt	ther in	formation	concerning this m	atter, plea	se cal	1:	
JOSEPI	H PRIC	E		412 at (,	276-2600	
	Nam	e of Perso	n	Area C	Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			S:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclose	ed is a	check for	the following amo	ount:			
\$ 70	.00 Fil	ing Fec	□ \$78.75 Filin Certificate o			\$78.75 Filing Fee & Certified 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.	JOSEPH PRICE PAINTING INC	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	PRICE INDUSTRIES .	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2.	PENNSYLVANIA 25-1809284 3.	
4.	4/1/1998	
٠,	(Date of incorporation) 5. (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	4891 CAMPBELLS RUN ROAD PITTSBURGH PA 15205	
/٠,	(Principal office address)	
	(Current mailing address, if different)	
	(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
8.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	Japan S
	Name: <u>See attached page</u> .	
O	ffice Address:	***, **
	, Florida	
	(City) (Zip code)	
H de	Registered agent's acceptance: laving been named as registered agent and to accept service of process for the above stated corporation at the pesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capac	city. I
	irther agree to comply with the provisions of all statutes relative to the proper and complete performance of m uties, and I am familiar with and accept the obligations of my position as registered agent.	y
	(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.

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(Enter name of corporation; must include "INCORPORA" lnc.," "Co.," "Corp," "Inc.," "Co," or "Corp,")	ATED," "COMPAI	NY," "CORI	ORATI	ON."
PRICE INDUSTRIES				
(If name unavailable in Florida, enter alternate corporate	name adopted for	the purpose o	f transac	ting b
				-
(State or country under the law of which it is incorpora	ted)	(FEI ne	imber, if	applic
4/1/1998	_			
(Date of incorporation)	3,	Tate of durati	an it at	her tha
(Date first transacted but (SEE SECTIONS 607,1501 &	. 1107 . 1 . 10 . 1 . 10 . 1 . 10 . 1 . 10 . 1 . 1	determine he	tration) enalty lia	bility)
4891 CAMPBELLS RUN ROAD PITTSBURGH PA 1:	(Principal office ad	dress)		<u></u>
	,	·· ,		
(Curre	n mailing address,	f different)		
Name: Robert D. F	Lemina			フィ
Office Address: Zoo S. Bànana Ki	Leming Ver Blud	(, Sus	Te .	
Name: Robert D. F. Office Address: Zoo S. Bonana Ri. Cocoa Beach (City)	Leming Ver Blud	(, Sus	Te .	
Name: Robert J. F. Office Address: Zoo S. Bondad K. Cocoo Beach (City) 9. Registered agent's acceptance: Having been named as registered agent and to accepte the designated in this application, I hereby accept the defurther agree to comply with the provisions of all stiduties, and I am familiar with and accept the obliging	Leming Ler BLv Flo ppt service of procuppointment as relative to attended by positions of my positions of my positions.	rida 3 (Zip o	Te 293 (code) above sent and and con	tated agree aplete
Name: Robert J. F. Office Address: Zoo S. Bondad K. Cocoo Beach (City) 9. Registered agent's acceptance: Having been named as registered agent and to accepte the designated in this application, I hereby accept the defurther agree to comply with the provisions of all stiduties, and I am familiar with and accept the obliging	Leming Ler BLv Flo ppt service of procuppointment as relative to attended by positions of my positions of my positions.	rida 3 (Zip o	Te 293 (code) above sent and and con	tated agree aplete
Name: Robert J. F. Office Address: 200 S. Bonand Right Cocoa Beach (City) 9. Registered agent's acceptance: Having been named as registered agent and to accepte the acceptance of this application, I hereby accept the acceptance agree to comply with the provisions of all significances.	Leming Jer Blud Flo ppt service of proceppointment as relative to ations of my positions of my positions are agent's significated, not more	rida 3 (Zip consess for the gistered agosthe proper consession as registered)	Z 9 2 code) above sent and and constered a	tated agree applete gent.
Name: Robert J. F. Office Address: Zoo S. Bonana R. Cocoa Beach (City) 9. Registered agent's acceptance: Having been named as registered agent and to accepte designated in this application, I hereby accept the offurther agree to comply with the provisions of all standaties, and I am familiar with and accept the obligation. Attached is a certificate of existence duly authorithe Department of State, by the Secretary of State of	Leming Jer Blud Flo ppt service of proceppointment as relative to ations of my positions of my positions are agent's significated, not more	rida 3 (Zip consess for the gistered agosthe proper consession as registered)	293 code) above sent and constered a	tated agree applete gent.
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11. Names and business addresses of officers and/or directors:	FILE.
A. DIRECTORS	2017 100
Chairman: JOSEPH PRICE	2017 APR-4 PH 2:59
Address: 5 JACOB DRIVE	LIMASON UF STATE
CARNEGIE PA 15106	T.E. FLORIO.
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: JOSEPH PRICE	<u> </u>
Address: 5 JACOB DRIVE	
CARNEGIE PA 15106	d y la de la
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	- AT
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	al 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) a are true and that he or she is aware that false information submitted in a document to t a third degree felony as provided for in s.817.155, F.S.	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

03/29/2017

2017 APR -4 PH 2:59
FALLAHASSEE FLORIS

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

JOSEPH PRICE PAINTING, 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

Secretary of the Commonwealth

Certification Number: TSC170329131302-1

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