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SECRETARY OF STATE

S Warren MAY 1 7 2017

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Iron Hill		oration - mus	t include suffix	
	reame of corpe	Manon - mus	i iliciude suilix	
Dear Sir or Madam:				
"Certificate of Existen	ntion by Foreign Corporation," or "Certificate of Googn corporation to transact	d Standing"	and check are sub	
Please return all corres	spondence concerning this	matter to the	following:	
Christine Holt				
	Na	me of Person		
Iron Hill Company				<u> </u>
	Firm	n/Company		
4801 Linton Blvd, #11A	-403			
		Address		
Delray Beach, FL 33484				
	City/S	State and Zip	code	
Chrissy@IronHillComp	any.com		· · · · · · · · · · · · · · · · · · ·	
	E-mail address: (to be	used for fut	are annual report i	notification)
For further informatio	n concerning this matter, p	lease call:		
Chrissy Holt at (561) 756-0246				
Name of Pers	on Are	ea Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Statu		75 Filing Fee & ified 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.

Iron Hill Compa			
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transaction	ng business in Florida)
2. Pennsylvania		47-4975870	
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	oplicable)
4. July 20, 2015	5.		
(Date	(Date of incorporation) 5. (Date of duration, if other than perpetu		than perpetual)
5			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) O2. F.S. to determine penalty liabil	ity)
- 100 T.Y	•	52, 1,53, 15 determine persons, 1,455.	,/
7.120 E Lancaster	Avenue, Ardmore, PA 19003 (Principal	al office address)	
570 F.LC44-	•	,	
אוומטוביוב ו אן עון ר			
J/J Latavelle	Avenue, Norristown, PA 19401 (Current mailing)	g address, if different)	
JIJ L Lalayette		g address, if different)	7. SE 7. 1.
	(Current mailing	, ,	SECOND TALLAH
8. Name and stre	(Current mailing et address of Florida registered agent: (P.O.)	, ,	17 HAY 16 SECRETARY FALLAHASS
	(Current mailing	, ,	17 MAY 16 PP SECKLIANN OF TALLAHASSEE.
8. Name and stre	(Current mailing et address of Florida registered agent: (P.O.)	, ,	FILED 17 MAY 16 PM 12: SECRETARY OF ST FALL AHASSEE, FLO
3. Name and <u>stre</u> Name:	(Current mailing et address of Florida registered agent: (P.O.) Christine Holt 4801 Linton Blvd, #11A-403	. Box <u>NOT</u> acceptable)	FILED 17 MAY 16 PM 12: 46 SECHELANCY OF STATE FALLAHASSEE, FLORID
3. Name and <u>stre</u> Name:	(Current mailing et address of Florida registered agent: (P.O.) Christine Holt 4801 Linton Blvd, #11A-403	, ,	ति ।
3. Name and <u>stree</u> Name: Office Address:	(Current mailing et address of Florida registered agent: (P.O.) Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City)	9. Box <u>NOT</u> acceptable), Florida <u>33445</u>	TALLAHASSEE, FLORIDA
3. Name and streen Name: Office Address:	(Current mailing et address of Florida registered agent: (P.O. Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City)	P. Box NOT acceptable) , Florida 33445 (Zip code)	≯'
3. Name and streen Name: Office Address: Office Registered ag Having been name	(Current mailing et address of Florida registered agent: (P.O.) Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City)	D. Box NOT acceptable) , Florida 33445 (Zip code) ce of process for the above state	>` ed corporation at the pla
Name and streen Name: Office Address: Registered ag Having been namelesignated in this further agree to designate to desi	(Current mailing et address of Florida registered agent: (P.O. Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City) Jent's acceptance: Med as registered agent and to accept serving application, I hereby accept the appoint the comply with the provisions of all statutes registered agent.	. Box NOT acceptable) , Florida 33445, Florida (Zip code) ce of process for the above statement as registered agent and agelative to the proper and compe	> ed corporation at the pla ree to act in this capacit lete performance of my
Name and streen Name: Office Address: Registered ag Having been nam designated in this further agree to c	(Current mailing et address of Florida registered agent: (P.O. Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointm	. Box NOT acceptable) , Florida 33445, Florida (Zip code) ce of process for the above statement as registered agent and agelative to the proper and compe	> ed corporation at the pla ree to act in this capacit lete performance of my
Name and streen Name: Office Address: Registered ag Having been namelesignated in this further agree to designate to desi	(Current mailing et address of Florida registered agent: (P.O. Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City) Jent's acceptance: Med as registered agent and to accept serving application, I hereby accept the appoint the comply with the provisions of all statutes registered agent.	. Box NOT acceptable) , Florida 33445, Florida (Zip code) ce of process for the above statement as registered agent and agelative to the proper and compe	> ed corporation at the pla ree to act in this capacit lete performance of my
Name and streen Name: Office Address: Registered ag Having been name designated in this further agree to designate to des	(Current mailing et address of Florida registered agent: (P.O. Christine Holt 4801 Linton Blvd, #11A-403 Delray Beach (City) Jent's acceptance: Med as registered agent and to accept serving application, I hereby accept the appoint the comply with the provisions of all statutes registered agent.	. Box NOT acceptable) , Florida 33445, Florida (Zip code) ce of process for the above statement as registered agent and agelative to the proper and compe	> ed corporation at the pla ree to act in this capacit lete performance of my

under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Joseph Grasso	SSE 6
Address: 579 E Lafayette Street	m 3 0
Norristown, PA 19401	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	
12. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) aff are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.	irms that the facts stated herein

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

05/10/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

IRON HILL COMPANY

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.

OF HE CONTROL OF THE CONTROL OF THE

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: TSC170510110812-1

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