F170000003911

(Re	questor's Name)						
(Ad	dress)						
(Address)							
(Cit	ty/State/Zip/Phone #)						
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to	Filing Officer:						

Office Use Only



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S. WARREN AUG 2 9 2017



August 2, 2017

THOMAS W. GRAHAM 1500 GRUNDYS LANE BRISTOL, PA 19007

SUBJECT: OFFICE ENVIRONMENTS INC.

Ref. Number: W17000063275

We have received your document for OFFICE ENVIRONMENTS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is F02000004796 OFFICE ENVIRONMENTS, INC..

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.

Letter Number: 017A00015647

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Office Environments, Inc.	
Name of corporation	- must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact busine	ding" and check are submitted to register the
Please return all correspondence concerning this matter	to the following:
Thomas W Graham	
Name of	Person
Office Environments, Inc	
Firm/Com	pany
1500 Grundys Lane	
Addre	ss
Bristol, PA 19007	
City/State as	nd Zip code
bmallov@oconline.net	
E-mail address: (to be used f	or future annual report notification)
For further information concerning this matter, please c	all:
William Malloy at (267) 553-1000 x 235
Name of Person Area Code	
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:	
■ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ Certificate of Status	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certified Copy 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.	Office Environs						
	(Enter name of o	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	,		
		OE South In	ے				
	(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting	business in Flo	rida)	
2.	New Jersey		3.	22-2479017			
		ry under the law of which it is incorporated		(FEI number, if applicable)			
4	10/1983		5				
• • •		of incorporation)		(Date of duration, if other th	an perpetual)		
6	none						
υ.				Florida, if prior to registration)			
		(SEE SECTIONS 607.1501 & 60	7.15	502, F.S., to determine penalty liability)		
7.	1500 Grundys La	ne Bristol, PA 19007					
		(Pri	ncip	oal office address)			
٠		(Current m	ailir	g address, if different)	<u>; -</u>	17	
						SINV -	
8.	Name and stree	et address of Florida registered agent:	(P.C). Box <u>NOT</u> acceptable)	: : -	~ -	
	Name:	Gary Holck				33 [
					•	PH	
Of	ffice Address:	4850 NE 25th Ave Unit A			= 1	دب	
		Fort Lauderdale		, Florida 33308	長点	38	
•		(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.

(Kegistered 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: ______ Vice Chairman: Address: __ Director: _ **B. OFFICERS** President: Thomas W Graham Address: 39 Sentinel Rd Washington Crossing, PA 19047 Vice President: Karen L Graham Address: 190 Bull Thistle Lane Kiawah Island, SC 29455 Secretary: Thomas W Graham Address: 39 Sentinel Rd Washington Crossing, PA 19047

Treasurer: Thomas W Graham

Address: 39 Sentinel Rd Washington Crossing, PA 19047

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

- In the control of t

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. Thomas W Graham / President

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

OFFICE ENVIRONMENTS INC.

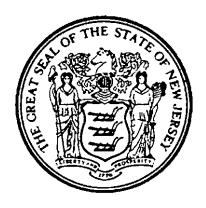
0100209475

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on October 27, 1983.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

Bill Malloy 5 Callie Court Barrington, NJ 08007



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of July, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6081323773

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp