

# F17000003978

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

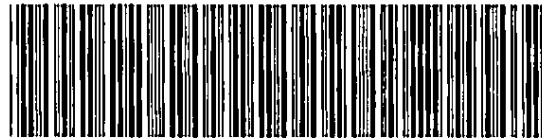
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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17 SEP - 1 AM 8:28  
DIVISION OF CORPORATIONS

O SIMMONS  
SEP 05 2017



*mascaro construction company, l.p.*

1720 metropolitan street • pittsburgh, pa 15233  
phone: 412.321.4901 • fax: 412.321.4922  
[www.mascaroconstruction.com](http://www.mascaroconstruction.com)

August 29, 2017

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attn: Octavia L. Simmons  
Regulatory Specialist II

RE: Ref. No. W1700006849  
Letter No. 217A00017238

Dear Ms. Simmons:

Mascaro Services, Inc. ("MSI") received your August 22, 2017 correspondence concerning registration to do business in the State of Florida. It was a mistake in completing the form; which it indicated on line 6 that MSI conducted business in Florida since 9/26/1996. Rather, that date is the date that MSI was formed and registered to do business in the State of Pennsylvania. MSI has never conducted any business activity in the State of Florida, but is hoping to do so in the future; which is reason why we are making the application.

Thank you for your time in this matter. Please contact me should you have any additional questions or require additional information.

Very truly yours,

MASCARO SERVICES, INC.

Paul R. Naim  
Corporate Counsel and Risk Manager

RECEIVED  
2017 SEP -1 AM 11:15  
STATE DEPT OF CORP  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mascaro Services, Inc.

\_\_\_\_\_  
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:

Paul R. Naim

\_\_\_\_\_  
Name of Person

Mascaro Services, Inc

\_\_\_\_\_  
Firm/Company

1720 Metropolitan Street

\_\_\_\_\_  
Address

Pittsburgh, PA 15233

\_\_\_\_\_  
City/State and Zip code

cpenrod@mascaroconstruction.com

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

For further information concerning this matter, please call:

Paul R. Naim

412

321-4901

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:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$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. Mascaro Services, Inc.  
(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)  
2. Pennsylvania, USA 3. 25-1799460  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Pennsylvania, USA 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
September 26, 1996

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
7. 9144 Sloane Street, Orlando, FL 32827  
(Principal office address)

1720 METZGERUTAN STREET, PITTSBURGH, PA 15233  
(Current mailing address, if different)

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

Name: John C. Mascaro, Sr.  
Office Address: 9144 Sloane Street  
Orlando, 32827  
(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.*

John C Mascaro Sr.  
(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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DIVISION OF  
REGISTRATION

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

**A. DIRECTORS**

Chairman: John C. Mascaro, Sr.  
9144 Sloane Street, Orlando FL 32827  
Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Director: John C. Mascaro, Jr.  
1720 Metropolitan Street  
Address: Pittsburgh, PA 15233  
\_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

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DIVISION OF CORPORATIONS

**B. OFFICERS**

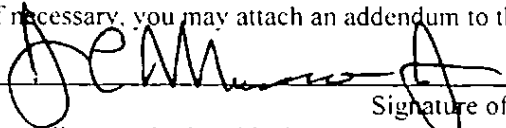
President: John C. Mascaro, Jr.  
1720 Metropolitan Street  
Address: Pittsburgh, PA 15233  
\_\_\_\_\_

Vice President: Jeffrey M. Mascaro  
Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Charles F. Solkovy  
1720 Metropolitan Street, Pittsburgh, PA 15233  
Address: \_\_\_\_\_

Treasurer: Charles F. Solkovy  
1720 Metropolitan Street, Pittsburgh, PA 15233  
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. John C. Mascaro, Jr.  
\_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

08/08/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

MASCARO SERVICES, 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: TSC170807130852-1

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