9/28/2017

Division of Corporations

D to f Cor pratio

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002560303)))



H170002560303ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Division of Cor	porations	₹.
	Fax Number	: (850)617-6383	<u> </u>
From:			AHA.
	Account Name	: C T CORPORATION SYSTEM	⋝.
	Account Number	: FCA000000023	1112
		: (512)418-6949	~ ~
	Fax Number	: (954)208-0845	- 1
			<u>~</u>
*Enter	the email address	for this business entity to be used for	future
anr	nual report maili	ngs. Enter only one email address please.	****
Ema	ail Address:		

FOREIGN PROFIT/NONPROFIT CORPORATION WATTS CONSTRUCTION GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

D SCOTT SEP 2 9 2017 رې

COVER LETTER

то:	Registration Section Division of Corporations					
CHDI	WATTS CONSTRUCTION GROUP, INC.					
SUBJECT: Name of corporation - must include suffix						
Dear Si	ir or Madam:					
"Certifi	telosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," ficate of Existence," or "Certificate of Good Standing" and check are submitted to register the referenced fereign corporation to transact business in Florida.					
Please	return all correspondence concerning this matter to the following:					
Mary M	vInnphy					
	Name of Person					
WATT	IS CONSTRUCTION GROUP, INC.					
	Firm/Company .					
1704 B	Bustleton Pike					
	Address					
Feaster	rville, PA 19053					
	City/State and Zip code					
nuuup	oliy@waitsrestoration.com					
	E-mail address: (to be used for future annual report notification)					
For fur	rther information concerning this matter, please call:					
Mary N	Murphy 215 426-7500					
	Name of Person Area Code Daytime Telephone Number					
	STREFT/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, FI 32314					
Enclos	sed is a check for the following amount:					
ন \$70	0.00 Filing Fee					

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 c	orporation; must include "INCORPORATED,"	COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		
(l! name unavail:	able in Florida, enter alternate corporate nume ad	opted for the purpose of transacting business in Florida)
PA	3		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
06/07/2000	5		.
(Date	of incorporation)	(Date of duration, if other than perpetual)	
Upon Filing			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	Torida, if prior to registration) 2. F.S., to determine nonalty liability)	
1704 Buetleton P	ike: Feasterville, PA 19053	2,1 Di, io determed paramy name,	
1704 1303000011		office address)	
	(Clarepa	···	
	(Current mailing	address, if different)	ī
	, ,		2 -
. Name and strep	et address of Florida registered agent: (P.O.	Box NOT acceptable)	F6 .
	C T Corporation System		$\mathcal{O}_{\mathcal{O}}$
Name:	1200 South Pine Island Road		£.
ffice Address:	1200 South Une Island Road	— · · · · · · · · · · · · · · · · · · ·	نه َ
	Plantation	, Florida 33324 (Zip code)	· 6
	(City)	(Zip code)	•
Davistaved og	antic a constantant		
lavine been nam	ent's acceptance: ied as registered agent and to accept service	of process for the above stated corporation at th	e place
esignated in this	application. I hereby accept the appointme	ent as registered agent and agree to act in this cap	pacity.
irther agree to c	omply with the provisions of all statutes ret familiar with and accept the obligations of i	alive to the proper and complete performance of my position as registered agent.	my
	C T Corporation Sys		

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.

(Registered agent's signature)

Danny Verdecchia Assistant Secretary

A. DIRECTORS	inicers and/or directors:	
NONE		
Vice Chairman:		
Address:		
		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Director:	÷.	
Address:		······································
Director:		
Address:		
B. OFFICERS		
President: Gerald Watts		
Address:		
Feasterville, PA 19053		
Vice President: Gerald Watts		<u> </u>
1702 Ructioton Pike		
Faustamilla DA 10057		را دم بربرین
Gerald Watts		
Address: 1704 Bustleton Pike, Feasterville		<u> </u>
Treasurer: Gerald Watts		i de
Address: 1704 Bustleton Pike, Feasterville,	, PA 19053	
NOTE: If necessary, you may attach ar	n addendum to the application listing additions	al officers and/or directors.
)	litte	
The officer or director signing this docu are true and that he or she is aware that a third degree felony us provided for in:	Signature of Director or Officer unent (and who is listed in number 11 above) a false information submitted in a document to the state of the state	affirms that the facts stated herein
13. Gerald Watts, President		
(Typed or printe	ed name and capacity of person signing applic	eation)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

09/28/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

LDO HEREBY CERTIFY THAT,

WATTS CONSTRUCTION GROUP, 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 Certific Te shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set Office to be affixed, the day and year above written,

Secretary of the Commonwealth

Certification Number: TSC170928151137-1

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