

F17000005470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

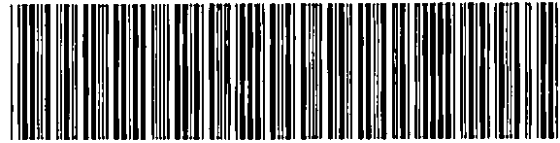
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200305755402

RECEIVED
17 NOV 28 PM 4:28

FILED
17 NOV 28 AM 9:28
STATE
TALLAHASSEE, FLORIDA

S. WARREN

DEC 06 2017

W17000095673



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2017

CORPORATION SERVICE COMPANY

SUBJECT: ANGELO PO AMERICA INC.
Ref. Number: W17000095673

RESUBMIT

Please give original
submission date as file date.

We have received your document for ANGELO PO AMERICA 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

ALEXANDER BOZIEVICH MUST BE LISTED IN #11.,

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 217A00024357

17 DEC -5 AM 11:15

REC'D



930802-5

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2017

CORPORATION SERVICE COMPANY

RESUBMIT

Please give original
submission date as file date.

SUBJECT: ANGELO PO AMERICA INC.
Ref. Number: W17000094407

We have received your document for ANGELO PO AMERICA 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 917A00024005

17 NOV 30 PM 4:22

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 930802 4328094

AUTHORIZATION :

COST LIMIT :

Spurlock
\$70.00

ORDER DATE : November 28, 2017

ORDER TIME : 12:22 PM

ORDER NO. : 930802-005

CUSTOMER NO: 4328094

FOREIGN FILINGS

NAME: ANGELO PO AMERICA INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

**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. Angelo Po America 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. Delaware 3. 46-5716004
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/06/2014 5. _____
(Date of incorporation) (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. 2920 Turnpike Drive, Suite 3-4, Hatboro, PA 19040
(Principal office address)
- _____ (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Corporation Service Company
- Office Address: 1201 Hays Street
- Tallahassee, Florida 32301
(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.

Corporation Service Company

By: Roxanne Turner

(Registered agent's signature)

Roxanne Turner
Asst. Vice President

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.

FILED
17 NOV 28 AM 9:28
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Massimo Alcardi

Address: 2920 Turnpike Drive, Suite 3-4

Hatboro, PA 19040

Director: Andrea Zitelli

Address: 2920 Turnpike Drive, Suite 3-4

Hatboro, PA 19040

B. OFFICERS

President: John Kramer

Address: 2920 Turnpike Drive, Suite 3-4

Hatboro, PA 19040

Vice President: _____

Address: _____

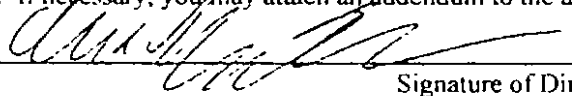
Secretary: James D. Mahlo

Address: 181 W. Madison Street, Floor 26, Chicago, IL 60602

Treasurer: Cynthia A. Rein

Address: 181 W. Madison Street, Floor 26, Chicago, IL 60602

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. Alexander Bozievich, Contoller

(Typed or printed name and capacity of person signing application)

ADDENDUM

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

B. OFFICERS

Controller: Alexander Bozievich

Address: 2920 Turnpike Drive, Suite 3-4

Hatboro, PA 19040

FILED
17 NOV 28 AM 9:28
U.S. DISTRICT COURT
MIAMI, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANGELO PO AMERICA INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANGELO PO AMERICA INC." WAS INCORPORATED ON THE SIXTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

5529179 8300

SR# 20177258975

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203638234

Date: 11-28-17