# F18000001874

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PICK-UP WAIT MAIL				
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SECRETARY OF STATE

K. SALY APR 20 2018

#### **COVER LETTER**

TO:	TO: Registration Section Division of Corporations						
SUBJ	ECT:	DMR Con	struction Services, Ir	ıc.			
	Name of corporation - must include suffix						
Dear S	Sir or Madan	n:					
"Certif	ficate of Exi	stence,"	by Foreign Corporation or "Certificate of Good Sorporation to transact bus	tanding"	and check are sub		
Please	return all co	orrespond	lence concerning this ma	tter to the	following:		
	Richard R	adici_			<del></del>	<del></del>	
			Name	of Persor	1		
	IMR Const	ruction	Services, Inc.				
			Firm/C	ompany			
	160 Hopper	Avenue					
		_	Ad	dress			
Wa	ldwick, Ne	w Jersey	, 07463				
			City/Stat	e and Zip	code		
	nb9nimbe_	rconstri	nct.com				
		Ì	E-mail address: (to be use	d for fut	ure annual report r	otification)	
For fur	ther inform	ation con	cerning this matter, pleas	se call:			
R	cichard Rad	ici	at ( 201	)	652-2411		
	Name of I	Person	Area C	lode	Daytime Telepl	hone 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			
Enclos	ed is a chec	k for the	following amount:				
<b>570</b>	0.00 Filing F	ee □	\$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & cified 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.	·	struction Services, Inc.				
		poration; must include "INCORPORATED," ' p," "Inc," "Co," or "Corp.")	'COMPANY,"	"CORPORATION,"	•	
	inc., co., coi	p, me, co, or corp. )				
į	(If name unavailab	le in Florida, enter alternate corporate name ad	opted for the pu	urpose of transacting l	business in Florida)	
2.	New Jersey	3	22-3145	5309		
		under the law of which it is incorporated)		(FEI number, if appli	cable)	
4.	1/6/92	5.				
	(Date o	f incorporation) 5	(Date o	of duration, if other tha	an perpetual)	
6.						
	·	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502				
			z, r .3., to uctor	ninic penanty naomity)	,	
7	160 Hopper	Avenue, Waldwick, New Jersey 07463	office address)		<del></del>	
		(i meipai	office address)			
_		(Current mailing	address, if diffe	erent)	24 SQ 65	
		, ,	•	,		•
8.	Name and street	address of Florida registered agent: (P.O.	Box NOT acc	ceptable)	AR 19	i =
	Name:	Richard Radici			2 F	7
	Name.				三 三 三	フ
Off	ice Address:	625 Casa Loma Blvd., Suite 104				
		Boynton Beach	. Florida	33435	景示 33 □	
		(City)	, Florida _	(Zip code)		
o '	Registered agen	t's accantanca.				
		l as registered agent and to accept service	of process fo	r the above stated o	corporation at the place	
des	ignated in this a <sub>l</sub>	pplication, I hereby accept the appointme	nt as register	ed agent and agree	to act in this capacity. I	
		uply with the provisions of all statutes rela niliar with and accept the obligations of n			performance of my	
	•	1		<b>g</b>		
		4:5				
		Shelf	6			
		(Registered age	ent'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:	<i>F</i> ~.
A. DIRECTORS	18 ADT ED
Chairman:	- 4PR 10
Address:	CALLANDARY OF STATE
Vice Chairman:	172
Address:	
Director	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Richard Radici	
Address: 160 Hopper Avenue	
Waldwick, New Jersey 07463	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional add	itional officers and/or directors.
12. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 about are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	
13. Richard Radici, President	

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

#### DMR CONSTRUCTION SERVICES, INC. 0100504832

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 January 06, 1992.

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:

RICHARD RADICI 160 HOPPER AVENUE WALDWICK, NJ 07463

CREAT CREAT

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of April, 2018

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6087594942

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp