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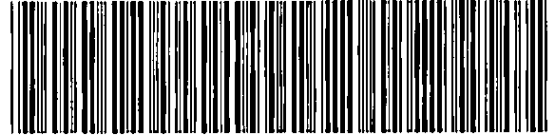
(Business Entity Name)

(Document Number)

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**DATE:** 6/22/18

**NAME:** W.D. WRIGHT CONTRACTING, INC.

**TYPE OF FILING:** APPLICATION

**COST:** 70.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

*AHodge*

2018 JUN 22 A 11:20

**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. W. D. Wright Contracting, 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 3. 25-1391346

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/30/1981

(Date of incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetual)

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1200 Sharon Road, Suite 1, Beaver, PA 15009

(Principal office address)

(Current mailing address, if different)

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

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee

(City)

Florida 32301

(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.*

DL Luther

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

**A. DIRECTORS**

Chairman: Bryan D. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Vice Chairman: W. David Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Director: Luke A. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Director: Lori S. Wright, Secretary/Treasurer

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

**B. OFFICERS**

President: Bryan D. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Vice President: W. David Wright and Luke A. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Secretary: Lori S. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

Treasurer: Lori S. Wright

Address: 1200 Sharon Road, Suite 1, Beaver, PA 15009

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. Bryan D. Wright, President

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

06/21/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

W. D. WRIGHT CONTRACTING, 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.

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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

*Robert Lanes*

Acting Secretary of the Commonwealth

Certification Number: TSC180621172200-1

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