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(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Busin	ness Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	es of Status
Special Instructions to Fil	ing Officer:	





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COVER LETTER

TO:		ration Secti on of Corpe					
SUBJE	ECT:	FGS US	A, INC.				
2,020,2				e of corporati	on - must	include suffix	
Dear Si	ir or Ma	adam:					
"Certifi	icate of	Existence,		te of Good S	tanding" a	and check are subm	Business in Florida," itted to register the
Please r	return a	ıll correspor	ndence concer	ning this ma	ter to the	following:	
THOM	IAS V	/ITT					
				Name	of Person		
FGS !	USA,	INC.					
				Firm/C	ompany		
3351	BIGE	LOW BOL	JLEVARD				
				Λd	dress		
PITTS	BURG	GH, PA 1	5219				
				City/State	and Zip	code	
TWIT	<u>⊤@</u> W	ITTPM.C	MC				
			E-mail addre	ss: (to be use	d for futu	re annual report not	rification)
For furt	ther inf	ormation co	ncerning this	matter, pleas	e call:		
THO	MAS \	WITT		_ at (<u>412</u>	!)	681-1900	
	Name	of Person		Area C	ode	Daytime Telepho	ne Number
	Regist Divisi Cliftor 2661 I	ration Secti on of Corpo n Building	enter Circle	SS:		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassec, F1.	tion porations
Enclose	ed is a c	check for the	e following ar	nount;			
청 \$70.	.00 Fili	ng Fee (S78.75 Fili Certificate	•		75 Filing Fee & fied 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.

(If name unavail	able in Florida, enter alternate corporate name ac		siness in Florida)
. <u>PA</u>		25-1755201	
(State or counti	y under the law of which it is incorporated)	(FEI number, if applica	ible)
01/01/1995	5	gergetual	
(Date	of incorporation)	(Date of duration, if other than	perpetual)
07/01/2018			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
	TOTAL DESIGNATION OF THE STATE	μ,	
	ON BOULEVARD DITTORUBOU	DA 45040 4050	
3351 BIGE	LOW BOULEVARD, PITTSBURGH, (Princing)		
3351_BIGE		PA 15219-1853 Lotfice address)	20
. 3351 BIGE	(Principa		2010
3351_BIGE	(Principa	I office address)	2010 JUL
	(Principa (Current mailing	d office address) gaddress, if different)	2016 JUL -2
. Name and stre	(Principa (Current mailing et address of Florida registered agent: (P.O.	d office address) gaddress, if different)	-2 NSSE
	(Principa (Current mailing	d office address) gaddress, if different)	-2 AH
. Name and <u>stre</u> Name:	(Principa (Current mailing et address of Florida registered agent: (P.O.	d office address) gaddress, if different)	-2 AM 9: 1
3. Name and stre	(Principa (Current mailing et address of Florida registered agent: (P.O. THOMAS WITT	d office address) gaddress, if different)	-2 AH

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.

(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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _____ _____ Vice Chairman: Director: Director: __ **B. OFFICERS** President: THOMAS H. WITT Address: 3351 BIGELOW BOULEVARD PITTSBURGH, PA 15219-1853 Vice President: Address: _____ Secretary: _THOMAS H. WITT Address: 3351 BIGELOW BOULEVARD, PITTSBURGH, PA 15219-1853 Treasurer: ___ Address: NOTE: If-necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. THOMAS H. WITT, PRESIDENT

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

06/20/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

FGS USA, 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.

OF THE COUNTY OF

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

Acting Secretary of the Commonwealth

Robert Lanes

Certification Number: TSC180620080160-1

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