

3/14/2019

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
EMPIRE DELIVERY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMPIRE DELIVERY, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

101 N. Brand Blvd 11th Floor

(Address)

Glendale, CA 91203

(City/State and Zip code)

For further information concerning this matter, please call:

Cheyenne Moseley

(Name of Person)

at (800) 773-0888ext9724

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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TALLAHASSEE, FLORIDA

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

EMPIRE DELIVERY, INC

1 _____
(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Pennsylvania

2 _____ 3 _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
12/03/2001

4 _____ 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)
1301 W 13th St Riviera Beach, Florida 33404

7 _____
(Principal office address)

(Current mailing address, if different)

8 Name and street address of Florida registered agent (P O Box NOT acceptable)
United States Corporation Agents, Inc

Name. _____
13302 Winding Oak Court Suite A

Office Address _____ 33612
Tampa, Florida _____
(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.

Cheyenne Moseley, Assistant
Secretary on behalf of United
States Corporation Agents, Inc

X 

(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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II Names and business addresses of officers and/or directors

A. DIRECTORS

Chairman _____

Address _____

Vice Chairman _____

Address _____

Thomas J Donnelly

Director 12770 Townsend Rd

Address Philadelphia, PA 19134

Director _____

Address _____

B. OFFICERS

Thomas J Donnelly

President 12770 Townsend Rd

Address Philadelphia, PA 19134

Vice President: _____

Address _____

James E Matlock Jr

Secretary 12770 Townsend Rd Philadelphia, PA 19134

Address James E Matlock Jr

Treasurer 12770 Townsend Rd Philadelphia, PA 19134

Address _____

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.

Thomas J Donnelly, President

13 _____

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

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

03/06/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING

I DO HEREBY CERTIFY THAT,

EMPIRE DELIVERY, 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

Kathleen Bookman

Acting Secretary of the Commonwealth

Certification Number TSC190306111150-1

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