

F19000002283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

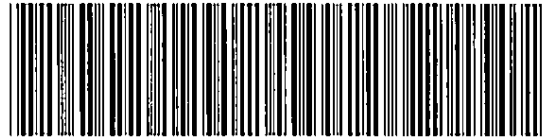
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 05/13/2019

Name: Joy Weaver

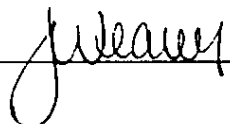
Reference #: 1073608

Entity Name: STNL III OPERATING CORP.

- ☒ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

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Authorized Amount: \$125

Signature: 



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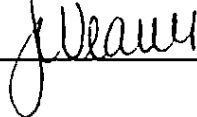
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Signature: 

**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. STNL III Operating Corp
(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)

2. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/23/19 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. 68 South Service Road, Suite 120, Melville, NY 11747
(Principal office address)

(Current mailing address, if different)

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

Name: COGENCY GLOBAL INC.

Office Address: 115 North Calhoun Street, Suite 4

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.

Colleen Hernas

(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: Kevin P. Burns ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Vice Chairman: Bernard J. Angelo ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Director: Kevin P. Burns ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Director: Damian P. Perez ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

B. OFFICERS

President: Kevin P. Burns ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Vice President: Jill A. Russo ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Secretary: Bernard J. Angelo ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

Treasurer: Bernard J. Angelo ✓

Address: 68 South Service Road, Suite 120, Melville, NY 11747

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. Jill A. Russo, Vice President
(Typed or printed name and capacity of person signing application)

ADDENDUM ADDITIONAL DIRECTORS/OFFICERS

Kevin P. Burns-Director ✓

68 South Service Road, Suite 120

Melville, NY 11747

John L. Fridlington-Vice President ✓

68 South Service Road, Suite 120

Melville, NY 11747

Frank B. Bilotta-Vice President ✓

68 South Service Road, Suite 120

Melville, NY 11747

Kevin J. Corrigan-Vice President

68 South Service Road, Suite 120

Melville, NY 11747

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Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STNL III OPERATING CORP." 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 TENTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STNL III OPERATING CORP." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2019.

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

2019 MAY 13 PM 4:46
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA



7387711 8300

SR# 20193766320

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

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

Jeffrey W. Bullock, Secretary of State

Authentication: 202804670

Date: 05-10-19