

F1900000257:

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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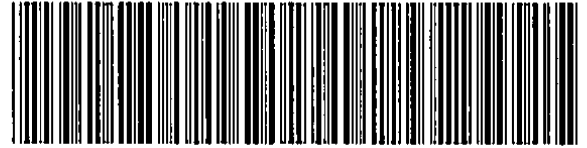
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 JUN -3 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 04 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2019

LISA GREENWAY
743 SOUTH BROAD ST
LITITZ, PA 17543

SUBJECT: ELA GROUP INC.
Ref. Number: W19000048821

2019 JUN -2 PM 3:47

We have received your document for ELA GROUP INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 419A00010138

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELA Group 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," or "Certificate of Good Standing" 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:

Lisa Greenway

Name of Person

ELA Group Inc

Firm/Company

743 S Broad St

Address

Lititz PA 17543

City/State and Zip code

lmgreenway@elagroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Greenway

717 626-7271
at ()

Name of Person

Area Code

Daytime Telephone 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

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

**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. ELA Group Inc (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")	
<u>Engineers and Landscape Architects Group Inc.</u> (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. Pennsylvania (State or country under the law of which it is incorporated)	3. N/A (FEI number, if applicable)
4. 9/12/1996 (Date of incorporation)	5. N/A (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. 1491 2nd Street Suite C-1 Sarasota FL 34236 (Principal office address)	
PO Box 711 Sarasota FL 34230 (Current mailing address, if different)	

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

Name:	CT Corporation System
Office Address:	1200 South Pine Island Rd
	Plantation, Florida 33324
	(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.

 Ternell Kearney Asst. Secretary
(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Richard L. Jackson

Address: 743 S Broad St

Lititz PA 17543

Director: Grant W Hummer

Address: 743 S Broad St

Lititz PA 17543

B. OFFICERS

President: Charles R Haley Jr

Address: 743 S Broad St

Lititz PA 17543

Vice President: _____

Address: _____

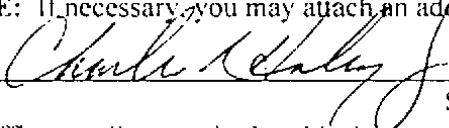
Secretary: Cheryl L. Love

Address: 743 S Broad St Lititz PA 17543

Treasurer: Shawn H Loose

Address: 743 S Broad St Lititz PA 17543

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. Charles R Haley Jr, President

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

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DEPARTMENT OF STATE
HALL

Addendum to the Application

Additional Listing of Directors:

Director: Hugh D Cadzow

Address: 743 S Broad St Lititz PA 17543

Director: Brian Miller

Address: 743 S Broad St Lititz PA 17543

Director: Brent Schrock

Address: 743 S Broad St Lititz PA 17543

Director: Matthew R Harlow

Address: 2013 Sandy Dr Suite 103 State College PA 16803

Director: Ernest J Graham

Address: 408 N Main St Suite 200 Butler PA 16001

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SECRETARY OF STATE
PA 100
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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

05/01/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

E L A GROUP, 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.



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: TSC190501121026-1

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