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To:

Division of Corporations

Fax Number : (850)617-6383

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (614)280-3338 : (954)208-0845 Fax Number

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

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FOREIGN PROFIT/NONPROFIT CORPORATION U.S. FACILITIES, INC.

Certificate of Status	0
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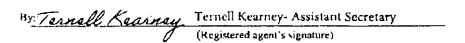
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

	orporation; must include "INCORPORATED," lorp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,	17	
USF INC.				
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting	business in Florida)	
DE	3	23-3035879		
	y under the law of which it is incorporated)	(FEI number, if applicable)		
10/19/2006		01/08/2014		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150) eet, Suite 400, Philadelphia, PA 19104	Florida, if prior to registration) 12, F.S., to determine penalty liability	y)	
	(Principa	office address)		
	(Current mailing	3 address, if different)	2019	
. Name and stree	et address of Florida registered agent: (P.O	. Box NOT acceptable)	2019 AUG	
Name:	C T Corporation System		::: 21 8	
ffice Address;	1200 South Pine Island Road	·- 	: 3	
	Plantation	, Florida 33324	# 1: 0 # 1: 0	
	(City)	(Zip code)	± 52	

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.



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. Nam	es and business addresses of officers and/or directors;			
A. DIRI	ECTORS			
Chairman	Willie F Johnson			
	30 North 41st Street, Suite 400, Philadelphia, PA 19104			
Vian Chai	rman:			
Address:				- ;
	Malik Majeed			
Director:				
Address:	30 North 41st Street, Suite 400, Philadelphia, PA 19104			·
Director:	Thomas Leonard			
Address:	30 North 41st Street, Suite 400, Philadelphia, PA 19104			
B. OFF				
	James Dorbrowolski			
	30 North 41st Street, Suite 400, Philadelphia, PA 19104		2019	
Address:	Jo Holdin VII, Batch, Batch, Control Vo., 1 March, 1981	<u>!</u>	- - -	"刑
		<u></u>	- 57	T.=20
Vice Pres	ident:	1:	_~~	
Address:			<u> </u>	
			<u>=</u>	الوسيدة
Secretary	Mulik Majecd		52	·
	30 North 41st Street, Suite 400, Philadelphia, PA 19104			
Treasurer				•
	`			
Address:				
	If necessary, you may attach an addendum to the application listing additional officers	and/or dire	ectors.	
12.	Signature of Director or Officer			<u></u>
	er or director signing this document (and who is listed in number 11 above) affirms the			
	and that he or she is aware that false information submitted in a document to the Depart egree felony as provided for in s.817.155, F.S.	iment of St	ne consi	mutes
	Malik Majeed Secretary			
• •	(Typed or printed name and capacity of person signing application)			



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "U.S. FACILITIES, INC." 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 SIXTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

at corp.delaware.gov/authy

Authentication: 203361042

Date: 08-06-19