

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
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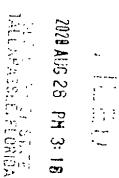
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07/27/20--01034--001 **70.00

09/01/20--01012--001 **650.60

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JUL 2 3 2020



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2020

KIMBERLY KRAMMES 200 PINEBROOK PLACE ORWIGSBURG, PA 17961-0278

SUBJECT: PREFERRED WARRANTIES, INC.

Ref. Number: W20000084287

We have received your document for PREFERRED WARRANTIES, INC. and your check(s) totaling \$70.00. Howevejr, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$150.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 420A00014560

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 Tal:



200 Pinebrook Place PO Box 278 Orwigsburg, PA 17961 Phone: 800.548.1121 Fax: 800.309.8334 preferredwarranties.com

August 27, 2020

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe St., Suite 810 Tallahassee, FL 32303

Re: Preferred Warranties, Inc. - Ref. Number: W20000084287

Ms. Yvette Scott:

Enclosed please find the PWI application along with a \$650,00 check for the \$500.00 civil penalty and the \$150,00 annual report filing fee.

If there are any questions, please feel free to call me at 570-366-6523 or email me at Kimberly,krammes@preferredwarranties.com. Thank you for your attention in this matter.

Sincerely.

Kimberly Krammes
Office Manager

Enclosure

RECEIVED AUG 2 8 2020 1 to 1

COVER LETTER

TO: Registration Secti Division of Corpo						
SUBJECT: Preferred W	arranties, Inc.					
JOINIECT:	Name of corporati	on - must	include suffix			
Dear Sir or Madam:						
"Certificate of Existence,"	n by Foreign Corporation fo for "Certificate of Good St corporation to transact busi	anding" a	nd check are sub			
Please return all corresponding Kimberly Krammes	ndence concerning this mat	er to the	following:			2028 AUS 28
	Name o	of Person				-5: -
Preferred Warranties, Inc.						(1)
	Firm/Co	mpany		-	~, ·	—]] ယှ
200 Pinebrook Place						
		dress			77	نك
Orwigsburg, PA 17961-027					. <u></u>	
	City/State	and Zip	code			
Kimberly.Krammes@prefer	redwarranties.com - E-mail address: (to be use	I for farm	es namual capacit	Valendia	<u>, </u>	
For further information co	oncerning this matter, please		re amuar reporer	KATICATION	,	
Frances York	at (317	843	-4802 Daytime Telep			
Name of Person	Area Co	ode -	Daytime Telep	hone Numb	er	-
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporation of Corp		section orporations 7				
	e following amount: o: FLORIDA DEPARTME? \$78.75 Filing Fee & Certificate of Status	□ \$78.7	ATE 5 Filing Fee & fied Copy			of Status &

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.

(Enter name of	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED." "COMPANY," "CORI	PORATION,"
	.,		
(If name unava	lable in Florida, enter alternate corporate nar	ne adopted for the purpose o	f transacting business in Florida)
PENNSYLVA	NIA	23-2675480	
(State or coun	ry under the law of which it is incorporated)	(FEI nu	mber, if applicable)
01/31/1992		5. PERPETUAL	100
(Dat	e of incorporation)		n, if other than perpennal)
January 2, 2019	•		28
	(Date first transacted busines (SEE SECTIONS 607.1501 & 607		ration)
200 Pinebrook P	lace, Orwigsburg, PA 17961-0278		
		office street address)	होत छ
Name and <u>stre</u> Name:		ling address, if different)	
-	(Current mai ct address of Florida registered agent: (F	ling address, if different)	
Name:	(Current mai et address of Florida registered agent: (F Corporation Service Company	ling address, if different) P.O. Box NOT acceptable)
Name:	(Current mai et address of Florida registered agent: (F Corporation Service Company 1201 Hays Street	ling address, if different) P.O. Box NOT acceptable)
Name: fice Address: Registered ag ving been namignated in this ther agree to c	(Current mai et address of Florida registered agent: (F Corporation Service Company 1201 Hays Street Tallahassec	ling address, if different) P.O. Box NOT acceptable , Florida 32301 (Zip cocording the about the strength of the proper and relative to the proper and	de) ove stated corporation at the place and agree to act in this capacity. d complete performance of my dut
Name: fice Address: Registered ag ving been namignated in this ther agree to c	(Current main cet address of Florida registered agent: (Florida registered agent: (Florida registered agent: (Florida registered agent: (Florida registered agent and to accept sere application, I hereby accept the appoin amply with the provisions of all statutes	ling address, if different) P.O. Box NOT acceptable , Florida 32301 (Zip cocording the about the strength of the proper and relative to the proper and	de) ove stated corporation at the place and agree to act in this capacity. d complete performance of my duti

Deb Reeves, Assistant Vice President
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.

A. DIRECTORS					
☐Chairman	Name: Edmund G, Field	□Chairman	Name: Mark R. Nelson		
□Vice Chamman	Address: 11299 N. Illinos Street	□Vice Chairman	Address		
■ Director	Carmel, IN 46032	□Director Carmel, IN 46032			
■ President		□President			
□Vice President		□Vice President	····		
☐Secretary	☐Treasurer	■ Secretary	□Treasurer		
□Other	Other	□Other	□Other		
☐Chairman	James E. Money, II	□Chanman	Leon Robert Faust, Jr.		
□Vice Chairman	11299 N. Illinois Street	□Vice Chairman	200 Pinebrook Place		
Director	Carmel, IN 46032	□Director	Occupation DA 1706150278		
□President		□President	AUC 2		
□Vice President		□Vice President	28		
□Secretary	☐Treasurer	□ Secretary	☐ Treasurer		
■Other	□Other	■Other Sr. Vice P	(
□Chairman	Name:	□Chairman	Paul C. Kramarz Name:		
	11299 N. Illinois Street		Address:		
□ Director	Carmel. IN 46032	☐ Director	Carmel, IN 46032		
□President		□President			
□Vice President		■Vice President			
☐Secretary	■ Treasurer	□Secretary	☐ Treasurer		
□Other	□Othet	□Other	□Other		
individuals may be	Jse an attachment to report more than six (6). The added to the index when filing your Florida Departs	ment of State Annual Rep	port form.		
1	Signature of Directo	r or Officer			
she is aware that fa s.817.455, F.S.	tor signing this document (and who is listed in num ke information submitted in a document to the Depi RK R. MelSDN Secre	artment of State constitut	at the facts stated herein are true and that he or les a third degree felony as provided for in		

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

07/15/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

PREFERRED WARRANTIES, INC.

is duly registered as a Pennsylvania PA Close Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the dates 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.

OC THE CONTROL OF THE

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

Secretary of the Commonwealth

Certification Number: TSC200715121344-1

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