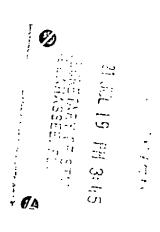
# F21000004056

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

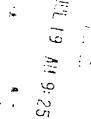


400369958314



) () 2021

Ar mbist



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 916236 4305611

AUTHORIZATION :

COST LIMIT : \$ 707.00

ORDER DATE : July 19, 2021

ORDER TIME : 2:50 PM

ORDER NO. : 916236-005

CUSTOMER NO: 4305611

### FOREIGN FILINGS

NAME: CONRAD M. SIEGEL INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:

## 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.

(18	2.11.2.20			_
	lable in Florida, enter alternate corporate name		g business in Florida)	
Pennsylvania	3	3. <u>23-1669823</u>	·	_
	try under the law of which it is incorporated)	(FEI number, if ap	plicable)	
06/22/1966	5	j,		_
(Date of incorporation) 5.		(Date of duration, if other t	(Date of duration, if other than perpetual)	
				_
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liabili	ty)	
501 Corporate C	fircle, P.O. Box 5900, Harrisburg, PA 17110-0	0900		
·	(Principal of	ffice street address)	<del>-</del>	-
	(Current mail	ing address, if different)	202	
			2021 JU	
Name and stre	et address of Florida registered agent: (P.	.O. Box NOT acceptable)	<u>.</u>	٠,
Name:	Corporation Service Company		19	
Y	1201 Hays Street			
fice Address:			ف ء	
	Tallahassee	Florida	25	
	(City)	(Zip code)		

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 Jon Cramer Name: Name: Mark Bonsall □ Chairman □ Chairman 501 Corporate Circle Address: \_\_\_\_ ☐Vice Chairman ☐ Vice Chairman P.O. Box 5900 P.O. Box 5900 □Director □ Director Harrisburg, PA 17110 Harrisburg, PA 17110 President ☐ President □Vice President ■ Vice President ☐ Secretary ☐Treasurer Secretary □ Treasurer ■Other Partner Other □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: Abigail Fortino John Jeffrey □ Chairman □ Chairman Address: \_\_\_ 501 Corporate Circle □Vice Chairman Address: \_ □ Vice Chairman P.O. Box 5900 P.O. Box 5900 Director □ Director Harrisburg, PA 17110 Harrisburg, PA 17110 □President □President ■ Vice President ■ Vice President □ Secretary ☐Treasurer ☐ Secretary □ Treasurer Partner Partner \_ Other □Other □Other \_ Name: \_\_\_\_\_David Killick John Vargo ☐ Chairman Name: □ Chairman 501 Corporate Circle Address: 501 Corporate Circle □Vice Chairman Address: \_ ☐ Vice Chairman P.O. Box 5900 P.O. Box 5900 □Director Director Harrisburg, PA 17110 Harrisburg, PA 17110 □President □President ■Vice President \_\_ ■ Vice President □ Secretary ☐Treasurer □ Secretary ☐ Treasurer Partner \_\_ Partner Partner □Other \_\_\_\_\_ □Other \_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.

John Jeffrey, Partner and Vice President

## Florida Application by Foreign Corporation for Authorization to Transact Business Conrad M. Siegel Inc.

11a. Names and titles of primary officers and/or directors, continued

Ashley Wise, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

James Pyne, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Jon Sapochak, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Robert Glus, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Thomas Reese, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Laura Hess, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Trevor Bare, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Tara Mashack-Behney, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

David Lytle, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Tracy Burke, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Jeffrey Myers, Partner and Vice President 501 Corporate Circle P.O. Box 5900 Harrisburg, PA 17110

Frank Rhodes, Partner and Vice President 501 Corporate Circle

### • • •

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 07/19/2021

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

CONRAD M. SIEGEL 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.

OF THE COURT OF TH

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

Acting Secretary of the Commonwealth

Certification Number: TSC210719110802-1

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