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### FOREIGN PROFIT/NONPROFIT CORPORATION

Stan Perkoski's Plumbing & Heating, Inc.

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## To: 18506176383 Page: 2/4

### 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 "INCORPORATED," "COMPANY," "CORPORATION,"  "Inc.," "Cor," "Corp," "Inc.," "Co," or "Corp,")  (If uame unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Delaware  (State or country under the law of which it is incorporated)  (Date of uration, if applicable)  (Date of incorporation)  (Date of incorporation)  (Date of uration, if other than perpetual)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  941 SE 43rd Terrace Cape Coral FL 33904  (Principal office street address)  (Current mailing address, if different)  Name:  Sumley Perkoski Jr.  (City)  (City)  Registered agent's acceptance:  Priorida 3.3904  (City)  Registered agent's acceptance:  Priorida process for the above stated corporation at the place	(Enter name of			
(State or country under the law of which it is incotporated)  (FEI number, if applicable)  (Date of incorporation)  (Date of incorporation in applicable)  (Cape Secretary and in a professional incorporation in applicable)  (Cape Coral	"Inc.," "Co.," "	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	<del></del> -
(State or country under the law of which it is incorporated)  (FEI number, if applicable)  (Date of incorporation)  (Date of incorporation)  (Date of duration, if other than perpetual)  (Date of strainsacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penulty liability)  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Sumley Perkoski Jr.  (Cape Coral Florida 13904  (City)  (City)  Registered agent's acceptance:	(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Fla	orida)
(Date of incorporation)  (Date of duration, if other than perpetual)  (Date of incorporation)  (Date of duration, if other than perpetual)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penulty liability)  (Principal office street address)  (Principal office street address)  (Current mailing address, if different)  Name: Stanley Perkoski Jr.  Stanley Perkoski Jr.  (Cape Coral Florida registered agent: (P.O. Box NOT acceptable)  Cape Coral Florida Flo	Delaware		57 200763	onda)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penulty liability)  41 SE 43rd Terrace Cape Coral FL 33904  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Sumley Perkoski Jr.  Page Coral Sumley Perkoski Jr.  Cape Coral Florida Signed Perkoski Jr.  (City) Florida Signed Perkoski Jr.  (City) (Zip code)  Registered agent's acceptance:	(State or coun- 12/23/1996	xy under the law of which it is incorporated)	(FEI number, if applicable)	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penulty liability)  41 SE 43rd Terrace Cape Coral FL 33904  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Stanley Perkoskt Jr.  Page Coral  (City)  (City)  (City)  (Zip code)  (City code)	(Dat	e of incorporation) 5.		
(Current mailing address, if different)  Name: Sunley Perkoskt Jr.  Cape Coral  Cape Coral  Cape Coral  City)  (City)  (City)  (City)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penulty liability)  (Principal office street address)  (Current mailing address, if different)  Registered agent: (P.O. Box NOT acceptable)  Registered agent's acceptance:  (City)  (Cit			(Date of duration, if other than perpetual)	
(Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Sumley Perkoski Jr.  Public Address: 941 SE 43rd Terrace  Cape Coral . Florida		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15)	Florida, if prior to registration) 02. F.S., to determine penalty liability)	
Current mailing address, if different			r street wilden	
Name: Sumley Perkoski Jr.  Name: 941 SE 43rd Terrace  Cape Coral  (City)  Registered agent's acceptance:  Sumley Perkoski Jr.  (City)  (Zip code)		( - manpai Villa	o street address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Sunley Perkoski Jr.  Page Address: 941 SE 43rd Terrace  Cape Coral Florida 33904  (City) Florida (Zip code)  Registered agent's acceptance:	·	(Current mailing	uddress if different	
Name: Stanley Perkoski 3r.  Pice Address: 941 SE 43rd Terrace  Cape Coral City) Florida 33904  (City) (Zip code)  Registered agent's acceptance:				
Name: Sumley Perkoski Jr.  P41 SE 43rd Terrace  Cape Coral  (City)  (City)  Registered agent's acceptance:	Name and street	et address of Florida registered agant, (II C	D. Marin	
Cape Coral  (City)  (City)  (Zip code)  Registered agent's acceptance:		Togratered agent, (F.(),	Box NOL acceptable)	28
Cape Coral  (City)  (City)  (Zip code)  Registered agent's acceptance:		Stanley Perkoski Jr.	•	2021 F
Registered agent's acceptance:	Name:	Stanley Perkoskt Jr. 941 SE 43rd Terrace	•	
Registered agent's acceptance:	Name:	Stanley Perkoski Jr.  941 SE 43rd Terrace	· .	9
ving been named as registreed event and to	Name:	Stanley Perkoski Jr.  941 SE 43rd Terrace	· .	9
	Name: Tice Address:	Stanley Perkoski Jr.  941 SE 43rd Terrace  Cape Coral  (City)	· .	9
	Name: Tice Address:  Registered age wing been name	Simley Perkoski Jr.  941 SE 43rd Terrace  Cape Coral  (City)  ent's acceptance: ed as registered agent and to accept service	Florida 33904  (Zip code)  of process for the above stated corneration at	-6 PH 1: 49
Wer agree to comply with the second to this consists.	Name: Tice Address: Registered age wing been nam signated in this ther agree to co	Simley Perkoski Jr.  941 SE 43rd Terrace  Cape Coral  (City)  ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme	Florida 33904  (Zip code)  of process for the above stated corporation at as registered agent and agree to act in this a	-6 PH 1: 49
signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity, there agree to comply with the provisions of all statutes relative to the proper and complete performance of my dution of the proper and accept the obligations of my position as registered agent.	Name: ffice Address:  Registered age sving been nam signated in this other agree to co	Simley Perkoski Jr.  941 SE 43rd Terrace  Cape Coral  (City)  ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme	Florida 33904  (Zip code)  of process for the above stated corporation at as registered agent and agree to act in this a	-6 PH 1: 49
ther agree to comply with the annual to the consistence of the same of the sam	Name: Tice Address: Registered age ving been name signated in this ther agree to co	Simley Perkoski Jr.  941 SE 43rd Terrace  Cape Coral  (City)  ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme	Florida 33904  (Zip code)  of process for the above stated corporation at as registered agent and agree to act in this a	-6 PH 1: 49
Wet agree to comply with the manifest of the	Name: ffice Address:  Registered age wing been nam signated in this ther agree to co	Simley Perkoski Ir.  941 SE 43rd Terrace  Cape Coral  (City)  ent's acceptance: ed as registered agent and to accept service application. I hereby accept the appointme tomply with the provisions of all statutes rela with and accept the obligations of my posit	Florida  (Zip code)  of process for the above stated corporation at at registered agent and agree to act in this cative to the proper and complete performance atom as registered agent.	-6 PH 1: 49

10. Attached is a certificate of existence duly authoriticated, 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

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<sup>11.</sup> For initial indexing purposes, fist names, titles and addresses of the primary officers and/or directors [up to six (b) total]:

Fax: 8554613581

# To: 18506176383 H 2 1 000 2 9 7 3 6 43

A. DIRECTORS	s					
□Chainnan	Name: Stanley Perkoski Jr.	□Chairman				
⊡Vice Chairman	Address 941 SE 43 RD TER	OVice Chairman				
□ Director	CAPE CORAL FL	□ Director	Address:			
President	33904			<del></del>		
∐Vice President		☐ President		<del></del>	- ——	
DSсстениу	□ Freasurer	□Vice President		<del></del>		
GOther		☐ Secretary		□Treasure	er	
		Other	<del></del>	Other _		
DChairman	Name:	DChairman				
□Vice Chairman	Address:					
Director		□Vice Chairman	Address:			
ElPresident		Director				
DVice President		<b>ElPresident</b>			···-	···- · ·
LiSecretary		□Vice President		· · · · · · · · · · · · · · · · · · ·		
[]Other	CiTronsurer	USecretary		Officasme	t	
	C1Onher	Other	<del></del>	∐Other	<del>- 22</del>	
□ Chairman	Name:	El Chairman	Name:	461	21 KUG	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
□Vice Chairman	Address:			i	2	
Director					-0	
© President		C16		.,	• •	
□Vice President		□ Vice President	<del></del>		<b>O</b>	
OSecretary	□ Tiensurer	□ Secretary		filter.		
Other	[]Other	(1) Other		☐Tressurer		
12. 🗸 🕥	se an attachment to report more than six (6). The attachment to the matex when filing your Florida Department Signature of Director or	chnient will be imaged f nt of State Annual Repo	for reporting p at form,			
The officer or director	r signing this document and who is vist I					

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

13. Stenley Perkoski Jr.

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

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "STAN PERKOSKI'S PLUMBING & HEATING,

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 TWENTY-FIRST DAY OF

JULY, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAN PERKOSKI'S PLUMBING & HEATING, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 1996.

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

2703150 8300

SR# 20212759540

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

Jeffrey W. Bullock, Secretary of State

Authentication: 203724416

Date: 07-21-21

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