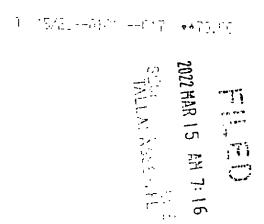
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(Requestor's Name)				
(Address)				
(Address)				
	(City/State/Zip/Phone #)			
PICK-UF	MAIL.			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



800383620448



S. ROBERTS
MAR 1 5 2022



Direct Dial: (717) 654 – 8312 Email: cbopp@kinsleysteel.com

March 11, 2022

VIA USPS FIRST CLASS

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Registration of Foreign Corporation

Dear Registration Section:

Enclosed, please find an application by foreign corporation for authorization to transact business in Florida, along with a certificate of good standing, and a check in the amount of \$70.00.

Please do not hesitate to contact me with any questions. Thank you.

BY:

Respectfully.

KINSLEY STEEL, INC.

Date:

Christopher W. Bopp, Esq.

Attorney I.D. 318805

P.O. Box. 2886 York, PA 17405

Enclosure

COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	Kinsley Steel, Inc.			
3030301.		ame of corporation	n - must include suffix	
Dear Sir or M	ladam:			
"Certificate o		icate of Good Star	Authorization to Transac ading" and check are subress in Florida.	
Please return	all correspondence con	cerning this matte	r to the following:	
Christopher W	7. Ворр			
		Name of	Person	
Kinsley Const	ruction			
		Firm/Con	npany	
P.O. Box 2886	5			
		Addr	ess	
York, PA 1746	05			
		City/State a	and Zip code	
cbopp@kinsle	yconstruction.com			
	E-mail add	dress: (to be used	for future annual report n	otification)
For further in	formation concerning th	nis matter, please	call:	
Christopher W	. Bopp	717 at (654-8312	
Nam	e of Person	Area Cod	le Daytime Teleph	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	_	A DEPARTMENT	F OF STATE ☐ \$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. Kinsley Steel, II		<u> </u>		
	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
•	able in Florida, enter alternate corporate name ad		ss in Florida)	
2. Pennsylvania 3. (State or country under the law of which it is incorporated)		87-3345949		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. ^{10/19/21}	5			
(Date	of incorporation) 5	(Date of duration, if other than perpendicular	ctual)	
6.				
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty liability)		
7 6259 Reynolds M	fill Road, Seven Valleys, PA 17360			
·	(Principal office	street address)		
3900 E. Market S	St., York, PA 17402			
	(Current mailing	address, if different)	702	
	_		E E	
8. Name and stree	et address of Florida registered agent: (P.O. l	Box NOT acceptable)	2022 HAR 1	
Name:	C T Corporation System	<u> </u>		
Office Address:	1200 South Pine Island Road			
office riddless.	Plantation	, Florida 33324		
	(City)	(Zip code)		
9. Registered age	ent's acceptance:			
Having been nam	ed as registered agent and to accept service			
	application, I hereby accept the appointme			
	omply with the provisions of all statutes rele with and accept the obligations of my posit		mance of my duties	
	C T Corporation System	TO THE TOP WITH THE MEDITE		
BY:	Wichel McCroy Nichol McCroy	Assistant Secretary		
_	Registered agent's sign	nature)		

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:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address: 3900 E. Market St.
□Director	York, PA 17402	□Director	York, PA 17402
■ President		□President	
□Vice President		□Vice President	
☐Secretary	□Treasurer	□Secretary	Treasurer
Other	□Other	Other	Other
	Ciara Young		
□Chairman	3900 E Market St	□Chairman	-
□Vice Chairman	Address: York, PA 17402	□Vice Chairman	Address:
□Director		Director	-
□President		□President	
□Vice President		□Vice President	•
■ Secretary	□Treasurer	□Secretary	□Treasurer
□Other	□Other	Other	□Other
□ Chairman	Name:	□Chairman	Name:
	Address:		Address:
Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	Other	□Other
The officer or direct she is aware that fars.817.155, F.S.	Use an attachment to report more than six (6). The attack added to the index when filing your Florida Department Signature of Director of Signature of Director of Color signing this document (and who is listed in number lise information submitted in a document to the Department of Director of	of State Annual Re TOfficer 11 above) affirms th	eport form. nat the facts stated herein are true and that he o
13. <u>Clar</u>	(Typed or printed name and capacity of perso	n ciemina ann'i acti	
	(a yped or printed name and capacity of perso	n signing application	1)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

01/14/2022

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

Kinsley Steel, 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.

THE COUNTY 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: TSC220114131249-1

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