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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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S. ROBERTS
MAY 0 9 2022

COVER LETTER

	ion Section of Corporations			
SUDJECT. L.	R. WEBBER ASSOCIATES	s, INC.		
SUBJECT:	Name of	corporation - i	nust include suffix	
Dear Sir or Mada	ım:			
"Certificate of Ex	pplication by Foreign Cor distence," or "Certificate of foreign corporation to tra	of Good Standin	ig" and check are submit	
Please return all o	correspondence concernin	g this matter to	the following:	
Daye Bearnson				
•		Name of Pe	rson	
20.0		Firm/Compa	ny	
PO Box 130				
	400 L 0 L 0 L	Address		
Cedar City, UT 84	4721-0135 		<u></u>	
	•	City/State and	Zip code	
daye-bearnson@le		(to be used for	future annual report not	(fication)
			·	
For further inform	nation concerning this ma	tter, please call		
Katie Bearnson		. , 435	8653825	
Name of	f Person	Area Code	Daytime Telephor	ne Number
Registrat Division The Cent 2415 N.	T/COURIER ADDRESS tion Section of Corporations tre of Tallahassee Monroe Street, Suite 810 see, FL 32303	:	MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion orations
Enclosed is a che Please make check \$70.00 Filing	eck for the following amore payable to: FLORIDA DE Fee	PARTMENT O		 \$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.

	corporation; must include "INCORPORATED Corp.," "Inc.," "Co.," or "Corp."))," "CO	MPANY," "CORPORATION	v. "
(If name unavail	lable in Florida, enter alternate corporate name	e adopte	d for the purpose of transactin	ng business in Florida
Pennsylvania	3	25-13	01205	
(State or count	ry under the law of which it is incorporated)	•	(FEI number, if applicable)	
06/18/1976	5			
	Date of incorporation) 5. (Date of duration, if other the		than perpetual)	
	<u> </u>			
			da, if prior to registration)	
1644 Plank Rd.,	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635			ity)
1644 Plank Rd.,	(SEE SECTIONS 607.1501 & 607.1	1502, F.	S., to determine penalty liabili	ity)
<u>.</u>	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635	1502, F.	S., to determine penalty liabili	
PO Box 130, Ce	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635 (Principal of dar City, UT 84721-0135 (Current mail)	Tice stre	S., to determine penalty liability set address)	2 0 2
PO Box 130, Ce	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635 (Principal of dar City, UT 84721-0135	Tice stre	S., to determine penalty liability set address)	2 0 2
PO Box 130, Ce	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635 (Principal of dar City, UT 84721-0135 (Current mail)	Tice stre	S., to determine penalty liability set address)	2022 HAY -9
PO Box 130, Ce	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635 (Principal of dar City, UT 84721-0135 (Current mail) et address of Florida registered agent: (P.	Tice stre	S., to determine penalty liability set address)	2022 HAY -9
PO Box 130, Ce Name and stre Name:	(SEE SECTIONS 607.1501 & 607.1 Duncansville, PA 16635 (Principal of dar City, UT 84721-0135 (Current mailinet address of Florida registered agent: (P. Corporation Service Company 1201 Hays Street	fice streeting addr	S., to determine penalty liability set address)	2022 MAY - 9 PI

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.

Mikayla M.	Lewis	Assistant Secretary	
	(Registered a	igent's signature)	

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: Mark G. Kenney	
□Vice Chairman	Address: PO Box 130	□Vice Chairman	Address: PO Box 130	
□Director	Cedar City, UT 84721-0135	□Director	Cedar City, UT 84721-0135	
□President		□President		
□Vice President		□ Vice President		
☐Secretary	□Treasurer	■ Secretary	☐ Treasurer	
□Other	Other	□Other	Other	
□Chairman	Jason Dennis	□ Chairman	Name: Beckie Beck	
	1644 Plank Rd	□ Vice Chairman	Name: 1644 Plank Rd.	
Director	Address:	□ Vice Chairman □ Director	Address: Duncansville, PA 16635	
□President		□President		
■Vice President		□Vice President		
Secretary	☐ Treasurer	□Secretary	□Treasurer	
Other	□()ther	Other	□Other	
□Chainnan	Hank Warmer	□Chairman	Name: Bracken Longhurst	
	PO Box 130 Address:	□ Chairman □ Vice Chairman	PO Box 130	
□ Director	Cedar City, UT 84721-0135	Director	Cedar City, UT 84721-0135	
□President		□President		
□Vice President		□Vice President		
□Secretary	Treasurer	□Secretary	□Treasurer	
Other	Other	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. 12. 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.				
13. Mark G. Ker	(Typed or printed name and capacity of person			
	(Typed or pringed name and capacity of perso	n signing application)	

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

04/29/2022

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

L. R. WEBBER ASSOCIATES, 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 COLUMN THE COLUMN

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: TSC220429141971-1

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