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. S. FRANKLIN AUG - 4 2022 TALL NEED LINKS

RECOUNTS

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. REFERENCE AUTHORIZATION COST LIMIT	: 120000000195 : 853979 7870132 : 570.00
ORDER DATE : August 3, 2022 ORDER TIME : 12:30 PM ORDER NO. : 853979-010 CUSTOMER NO: 7870132	2022 K 3 PM
FOREIGN FII NAME: FULTON THERMAL	LINGS 22 22 22 22 22 22 22 22 22 22 22 22 22
XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS E CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STAM	PROOF OF FILING:
CONTACT PERSON: Eyliena Baker -	EXT# EXAMINER:

COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Fulton Thermal Corp.			
	Name	of corporation	- must include suffix	-
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Co Existence," or "Certificate ced foreign corporation to t	of Good Stand	ing" and check are submit	Business in Florida," ited to register the
Please return a	all correspondence concern	ing this matter t	o the following:	
Melissa Obit				
		Name of P	erson	
	·	Firm/Comp	any	
6747 Benedict	Road West			
	· · · · · · · · · · · · · · · · · · ·	Addres	5	
East Syracuse,	New York 13057			
		City/State and	d Zip code	
adria.lorenzoni	@fulton.com			
	E-mail address	: (to be used fo	r future annual report notif	fication)
For further info	ormation concerning this m	atter, please cal	l:	
Melissa Obit		at (315	298-5121)	
Name	of Person	Area Code	Daytime Telephon	e Number
Registi Divisio The Ce 2415 N	ET/COURIER ADDRESS ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on orations
	heck for the following amo ck payable to: FLORIDA DE g Fee	PARTMENT O		387.50 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.

New York		adopted for the purpose of transacting business in Florida)
	3. y under the law of which it is incorporated)	16-1258901
08/13/1083	y under the law of which it is incorporated) 5.	(FEI number, it applicable)
(Date	of incorporation)	(Date of duration, if other than perpetual)
72 Centerville R		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
	(Principal offi	ice <u>street</u> address)
	(Current mailin	ng address, if different)
lame and stree	<u>et address</u> of Florida registered agent: (P.C	O. Box NOT acceptable)
Name:	Corporation Service Company	
ce Address:	1201 Hays Street	
	Tallahassee	Florida 32301
	(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 Name: Melissa Obit R. Bramley Palm, Jr. □Chairman □ Chairman 6747 Benedict Road West 6747 Benedict Road West □Vice Chairman □ Vice Chairman East Syracuse, New York 13057 East Syracuse, New York 13057 □Director □ Director President □President □ Vice President □Vice President □ Secretary □Treasurer □Treasurer **■** Secretary Other ___ □Other _____ □Other ___ □Other _____ Jennifer Edick Name: □ Chairman □ Chairman Name: 972 Centerville Road ☐ Vice Chairman Address: ☐ Vice Chairman Address: Pulaski, New York 13142 □ Director □ Director □President □ President □ Vice President □Vice President □ Secretary **■**Treasurer □ Secretary □ Treasurer □Other _____ Other ___ □Chairman Name: ____ □ Chairman Name: □Vice Chairman Address: _____ □ Vice Chairman Address: □ Director Director □President □ President □Vice President □Vice President □ Secretary ☐Treasurer □Secretary ☐ Treasurer □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. 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.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: FULTON THERMAL CORP.

DOS ID Number: 1018627

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 08/15/1985

Statement Status: CURRENT

Statement Due Date: 08/31/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on July 07, 2022 at 01:06 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Higher

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100001834666 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov