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10/26/2023

D	ate:	10/26/2023	_
	•	Acc#I20160000072	- w: DW
Name:	Stock, Gar	ber, And Associates, Ir	ncorporated
Document #:			
Order #:	15179525		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
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Thank you!

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 co "Inc.," "Co.," "Co	rporation; must include "INCORPORATED," * rp," "Inc," "Co," or "Corp.")	'COMPAN'	Y," "CORPORATION.	••
(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the	e purpose of transacting	business in Florida)
Pennsylvania	3, _			
(State or country	3 under the law of which it is incorporated)		(FEI number, if app	licable)
03/29/1990	of incorporation) 5			
(Date	of incorporation)	(Da	te of duration, if other th	nan perpetual)
1-1-2022 Econo	mic nexus occurred in 2022 and we filed incom-	e taxes for 2	022 in Florida	
-	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	Florida, if pr 2, F.S., to de	rior to registration) etermine penalty liabilit	y)
1368 MANOR DI	R. EBENSBURG, PA - 15931-5308			
	(Principal office	street addi	ress)	
	(Current mailing			
Name and street Name:	et address of Florida registered agent: (P.O. C T Corporation System			20
Name:	et address of Florida registered agent: (P.O.			2023 (
Name:	et address of Florida registered agent: (P.O. C T Corporation System			2023 OCT
Name:	C T Corporation System 1200 South Pine Island Road	Box <u>NOT</u>	_acceptable)	2023 OCT 26
Name: Office Address: Office Address: Office Address: Office Address: Office Address: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Na	et address of Florida registered agent: (P.O. C.T. Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointments of all statutes registered agents.	Box NOT FL FL Se of processent as regi	acceptable) 33324 (Zip code) ss for the above states istered agent and agrice proper and comple	d corporation at the p
Name: Office Address: Registered ag Having been nan Jesignated in this	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: med as registered agent and to accept service.	Box NOT FL FL Se of processent as regi	acceptable) 33324 (Zip code) ss for the above states istered agent and agrice proper and comple	d corporation at the p
Name: Office Address: Office Address: Office Address: Office Address: Office Address: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Name: Na	et address of Florida registered agent: (P.O. C.T. Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: med as registered agent and to accept services application. I hereby accept the appointment of the provisions of all statutes registered and accept the obligations of my positive with and accept the obligations of my positive comply.	Box NOT FL FL Se of processent as regi	acceptable) 33324 (Zip code) ss for the above states istered agent and agrice proper and comple	d corporation at the p

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

A. DIRECTORS Gary R Stock □Chairman Name: □ Chairman 1368 Manor Drive Address: □ Vice Chairman ☐ Vice Chairman Address: _ Ebensburg PA 15931 Director □ Director President 2 President □ Vice President □ Vice President ☐Treasurer □ Secretary □ Treasurer □ Secretary □Other _____ □Other _____ □ Other _____ □Other _____ Deborah A Stock Name: ______ □Chairman Name: □Chairman 1368 Manor Drive Address: □Vice Chairman Address: □ Vice Chairman Ebensburg PA 15931 □ Director □ Director President □ President □Vice President □ Vice President □Treasurer □ Secretary ☑ Treasurer ☑ Secretary Other _____ □Other _____ □Other _____ Name: _____ □Chairman Name: ______ □ Chairman Address: □Vice Chairman □Vice Chairman Address: ______ □ Director □ Director □President President □ Vice President □ Vice President □ Treasurer □ Secretary □Treasurer Secretary □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. Duhmaha Dack 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. Deborah A Stock, Secretary-Treasurer (Typed or printed name and capacity of person signing application)

Pennsylvania Department of State

. . . .

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding:

STOCK, GARBER, AND ASSOCIATES, INCORPORATED

Request Type:

Subsistence Certificate

Issuance Date: October 24, 2023

Request No.:

024273126

File No.:

0001559242

Receipt No.:

000740529

Filing Type:

Domestic Business Corporation

Filing Subtype:

Statutory Close

Initial Filing Date: March 29, 1990

Status:

Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

STOCK, GARBER, AND ASSOCIATES, INCORPORATED

is currently subsisting on the records of the Department of State as of the issuance 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.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Albert Schmidt

Secretary of the Commonwealth

Men Sehm

Verify this certificate online at www.file.dos.pa.gov