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

Office Use Only

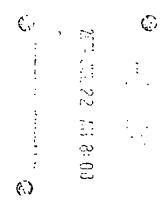


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RECEIVED

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Fire & Safety Ser Name	of corporation - m	ust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Standing	" and check are subn	
Please return all correspondence concern	ning this matter to the	ne following:	
David L. Russell			
	Name of Pers	on	
Fire - Safety Sorras C	Hd		
	Firm/Compan	Y	
200 Ryan St			<u> </u>
South Plainfield 15	Address		
/	City/State and Z	ip code	
drussell 6) f-ss. ccm E-mail address	ss: (to be used for fi	uture annual report no	otification)
For further information concerning this			
Name of Person	at (<u>& G</u>) Area Code	Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following an Please make check payable to: FLORIDA I \$70.00 Filing Fee \$78.75 Fili Certificate	DEPARTMENT OF ng Fee &	STATE 8.75 Filing Fee & ertified Copy	S87.50 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.

Fire + Salety Services LH Inc (Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATE			
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORAT "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")	TON."		
Fire & Solo Ly Services Tine. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transc	ecting business in I	-lorida)	
New Tersey 3. 22-1739599 (State or country under the law of which it is incorporated) (FEI number.	(FEI number, if applicable)		
Sept. 1964			
Sept. 1964 5. (Date of duration, if of	(Date of duration, if other than perpetual)		
(Date first transacted business in Florida, if prior to registration)			
(Date first transacted business in Florida, if prior to registration)	ability)		
(Date first transacted business in Florida, if prior to registration)	ability)	<u> </u>	
(Date first transacted business in Florida, if prior to registration)	ability)		
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(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150) & 607.1502, F.S., to determine penalty lie 200 Again St. South Plainfield UT 07080 (Principal office street address)	ability)		
(SEE SECTIONS 607.1502, F.S., to determine penalty lie 200 Ryam St. South Plainfield NT 07080 (Principal office street address) (Current mailing address, if different)	ability)	÷ <u>∓</u> ∴ 3	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150) & 607.1502, F.S., to determine penalty list 200 Pyrincipal office Street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	ability)	:=	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150) & 607.1502, F.S., to determine penalty list 200 Pyran St: South Plainfield NT 07080 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	ability)	B# 22 73	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150] & 607.1502, F.S., to determine penalty list 200 Plan St: South Plainfield NT 07080 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 15934 Clear Skies Pl.	ability)	## 22 7% G	
(SEE SECTIONS 607.150] & 607.1502, F.S., to determine penalty lie 200 Ryan St: South Plainfield NT 07080 (Principal office street address)	ability)	B# 22 73	

9. Registered agent's acceptance:

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.

(Registered agent'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. DERECTORS	2					
⊠€hairman	Name: David L. Physica (1	□Chairman	Name: Potricia Russell			
□Vice Chairman	Address: 215 Ward 5t	□Vice Chairman	Address: 5 Hofer Ct			
□Director	East Windson NJ 08520	₽Director	Mohnches 115 08840			
⊿President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	☐Treasurer			
□Other	Other	□Other	Other			
□Chairman	Name: Michael T. Assell	□Chairman	Name: Sean O'Cenpor			
	Address: 247 Shanter Rd	□Vice Chairman	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>			
⊒ Director	Rehway NJ 07065	□Director	South Amboy NJ 08879			
□President		□President				
□Vice President		☑Vice President				
□Secretary	□Treasurer	Secretary	□Treasurer			
□Other	□Other	□Other	Other			
	1					
□Chairman	Name: Koren L. Kelly	□Chairman	Name:			
□Vice Chairman	Address: 66 Winans Ave	□Vice Chairman	Address:			
☐Director	P. scataweg NJ 05854	□Director				
□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.						
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. //auxl (. //wssel //wssel //wssel //wssel)

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

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

FIRE & SAFETY SERVICES, LTD.

3881960000

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on September 24, 1964.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

DAVID L. RUSSELI. 200 RYAN STREET SOUTH PLAINFIELD, NJ 07080

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on August 05, 2023.

PRESIDENT DAVID L RUSSELL

215 WARD ST.

EAST WINDSOR, NJ 08520

SECRETARY KAREN L KELLY

66 WINANS AVE

PISCATAWAY, NJ 08854

VICE PRESIDENT SEAN M O'CONNOR

409 DIVISION ST.

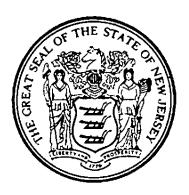
SOUTH AMBOY, NJ 08879

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Page 1 at 2

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

FIRE & SAFETY SERVICES, LTD. 3881960000



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of July, 2024

Elizabeth Maher Muoio State Treasurer

Sluper Mun

Certificate Number: 6155000201

Verify this certificate online at

https://www.f.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp