Florida Department of State

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Foreign Limited Liability Company Deangelo Brothers, LLC

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B. BOSTICK

Help JUN 18 2014

EXAMINER

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COVER LETTER

	mendment Section livision of Corporations		• ;	
SUBJEC	T: DeAngelo Brothers, Inc.		<u> </u>	
		(Name of Corporation	1)	
DOCUM	TENT NUMBER: F97000000347	·	· · · · · · · · · · · · · · · · · · ·	<u> </u>
The encl	osed withdrawal application and	fee are submitted for fi	ling.	
	turn all correspondence concerning the following:	g this		
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		(Name of Person)	<u> </u>	 ;;,
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,		(Firm/Company)	:	
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For furth	er information concerning this mat	ter, please call:		
		at ()		•
Enclosed	(Name of Person) is a check for the amount:	(Area Cod	e & Daytime Telephor	e Number)
□ \$35 Fi	iling Fee \$\bigcip\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	Certificate of Star	
· .	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS Amendment Section Division of Corporati 2661 Executive Center Tallahassee, FL. 3230	ons er Circle

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

DeAngelo Brothers LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.	," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alterna Liability Company," "LLC," or "LLC.")	te name must include "Limited	ı ·
Pennsylvania (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if appropriate to the law of which foreign limited liability company is organized)	plicable)	
4. Upon Qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 100 North Conshan Drive, Hazleton, PA 18201		
(Street Address of Principal Office)		
6. Same	· · · · · · · · · · · · · · · · · · ·	* ;
(Malling Address)	7.7	; manadur !
7. The name, title or capacity and address of the person(s) who has/have authority to	manage is/are:	,
Paul D. DeAngelo., 100 North Conshan Drive, Hazleton, PA 18201 Title: Manager		
Neal A. DeAngelo, 100 North Conshan Drive, Hazleton, PA 18201 Title: Manager		
8. Attached is an original certificate of existence, no more than 90 days old, duly auth having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate un must be submitted)	A photocopy is not	
Signature of an Suthorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of person am aware that any false information submitted in a document to the Department of State constitutes a third degree fellows as pro-		strue.]
· · · · · · · · · · · · · · · · · · ·		
Paul D. DeAngelo Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	or of the Limited Liability Company is:			
	ple, the alternate to be used in the state of Florida is:			- -
2. The nam	ne and the Florida street address of the registered agent and office are:			-
	C T Corporation System (Name)	 -		
	1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	_		
	Plantation FL 33324 City/State/Zip			
liability con registered a statutes rela	n named as registered agent and to accept service of process for the aboup and the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the ting to the proper and complete performance of my duties, and I am fan bligations of my position as registered agent as provided for in Chapter	o <i>lntment</i> e provisi viliar wit	as ons of ali h and	ı
	By: Kristin Bolden (Signature) Kristin Bolden Kristin Bolden			
	\$ 100.00 Filling Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	Tri gray		. a g

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE JUNE 9, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DeAngelo Brothers, LLC

is duly organized as a Pennsylvania Limited Liability Company 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.



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.

Chill Child

Secretary of the Commonwealth