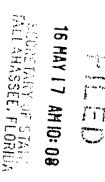
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(Re	equestor's Name)					
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status			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



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DEPARTNER! OF STAT

MAY 1 8 2016

Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 144704 7835581

AUTHORIZATION :

COST LIMIT : \$ 1/25.00

ORDER DATE: May 17, 2016

ORDER TIME: 3:29 PM

ORDER NO. : 144704-005

CUSTOMER NO: 7835581

FOREIGN FILINGS

NAME: CANDORIS TECHNOLOGIES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO:	Registration Sec Division of Corp						
CURIE	Candoris Te	chnologies, LLC					
21.005			of Limited Liability (Company	44		
		by Foreign Limited Liability Cou ubmitted to register the above refe					
Please re	eturn all correspon	dence concerning this matter to the	he following:				
	Stephan	Van Der Ploog					
	***************************************		Name of Person				
	Candori	s Technologies, LLC					
			Firm/Company				
	9 E. Ma	in St.					
	111		Address				
	Annville, PA 17003						
		City	/State and Zip Code				
	levans@c	andoris.com					
	- 10 (101)	E-mail address: (to be u	sed for future annual	report not	ification)		
For furth	ner information con	ncerning this matter, please call:					
	Lisa Evans		717 at (228-16	00		
		Name of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADD Division of Corpo Registration Secti P.O. Box 6327 Tallahassee, FL 3	orations ion		Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding ecutive Center Circle see, FL 32301		
Enclosed	d is a check for the \$125.00 Filing	e following amount: Fee \$\square\$ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certification of Status & Certified Copy	ne	

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

IN COMPILIANCE 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:

Candoris Technologies	, LLC			
(Name of Fore	eign Limited Liability Co	ompany: must include "Limit	ed Liability Company," "L.L.C	" or "LLC.")
(If name unavailable, enter all Liability Company," "L.L.C.		r the purpose of transacting t	business in Florida. The alterna	te name must include "Limited
, PA		3 27-410		
(Jurisdiction under the law company is organized)	of which foreign limited	Hiability 5.	(FEI number, if appli	cable)
5-5-2016				
4	(Date first trans	acted business in Florida, if p 0904 & 605.0905, F.S. to de-	orier to registration.)	
5. 9 E. Main St.	(See sections 605.)	0904 & 605.0905, F.S. to de	termine penalty hability)	
5. <u>22. Man 20.</u>				
Annville, PA 17003				
•	(Street	Address of Principal Office)		
6. same as above				
				· · · · · · · · · · · · · · · · · · ·
		(Mailing Address)		
7. Name and street address	ss of Florida registered	i agent: (P.O. Box NOT)	acceptable)	SSE
-	Corporation Service	-	,,	TS & T
Name:			THE REAL PROPERTY.	AND: 08
Office Address:	1201 Hays Street			
	Tallahassee		Florida 32301	
		(City)	(Zip cod	c)
Registered agent's accep		accept service of process	for the above stated limited	l liability company at the place
designated in this applica	tion. I hereby accept i	the appointment as regist	ered agent and agree to act	in this capacity. I further agree
to complywith the provision accept the obligations of i			nplete performance of my o	duties, and I am familiar with una
accept the voligations of t	_)	Courtney Williams
	By:	(Registered agent's sign	ature)	Asst. Vice President
6 m		,		,
•	-	•	authority to manage is/are:	
	The Accountability C	Officer and Lisa Evans, He	ad of Accounting	
9 E. Main St.				MM M-Indoor or common The
Annville, PA 17003				
				iving custody of records in the ion of the certificate under oath
of the translator must be si	•			
		Signature of an authorized	person	
This document is executed	f in accordance with se	ection 65.0203 (1) (b). Fl	orida Statutes. I am aware th	at any false information
			ee felony as provided for in	
	Stephan Van Der Ple	oog V		and the second second
		Typed or printed name of s	ignee	

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 11/24/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Candoris Technologies, LLC

is duly registered 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 Ponnsylvania are paid.



IN TESTIMONY WHEREOF, I have hereignto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC151124090194-1

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