,	Florida Department of State Division of Corporations Electronic Filing Cover Sheet
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	To: Division of Corporations Fax Number : (850)617-6383
	From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368
annual	email address for this business entity to be used for future report mailings. Enter only one email address please.**
Email A	Address:
	Foreign Limited Liability Company EnPro Industrial Services LLC   Certificate of Status   0   Certified Copy   0   Page Count   04   Estimated Charge

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7/1/2016	10:46:35	AM	From:	To:	8506176383(	2/4	)

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		C	OVER LETTER			
TO: Regi	stration Section sion of Corporat	·				
		· . :				
	EnPro Industrial					
		Name	of Limited Liability (	Company		
The enclosed Existence, and	"Application by I check are submi	Poreign Limited Liability Co itted to register the above ref	mpany for Authorizz crenced foreign limit	tion to T ted liabili	ransact Business in Florida," ity company to transact busine	Certificat ss in Floi
Please return a	ill correspondenc	e concerning this matter to t	he following:			
	John Borrell	t				
•		÷	Name of Person		<u></u>	·
	BnPro Indus	trial Services LLC				
	, <u></u> _,,		Firm/Company			
	120 North Li	me Street				
	·	· · · · · · · · · · · · · · · · · · ·	Address		······································	
	Lancaster, PA	A 17602				
	,	City	State and Zip Code	·····		
	JBorrelli@irex	corp.com				
	······································	E-mail address: (to be us	ed for future annual	report no	tification)	
or further info	rmation concerni	ng this matter, please call:				
John I	Borrelli		717	399-52	89	
	Namo	of Contact Person	Area Codo	Day	time Telephone Number	
MAILING ADDRESS <sub>1</sub> Division of Corporations Registration Section P.O. Box 6327		STREET ADDRESS: Division of Corporations Registration Section Clifton Building				
	ssee, FL 32214		;	2661 Exq	cutive Contor Circle 	
	eck for the follow	ving amount: \$130.00 Filing Fee & Certificate of Status	C \$155.00 Filing Cortified Capy	Fee &	☐ \$160.00 Filing Fee, Cert of Status & Certified Copy	licate

FL057 - WI0/2015 Walters Klewer Online

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APPLICATION BY I	OREIGN LIMITED LIABILITY	COMPANY FOR	AUTIIORIZATION	TO TRANSACT BUSIN
	CTION 605.0902, FLORIDA STATUTES, BUSINESS IN THE STATE OF FLORIDA:	THE FOLLOWING IS	SUBMITTED TO REGISTI	ER A FOREIGN LIMITED IJAI
1. EnPro Industrial Serv				
(Name of Fo	reign Limited Liability Company; must	include "Limited Lia	bility Company," "L.L.C.	," or "LLC.")
(if name unuvailable enter	alternate name adopted for the purpose	of transacting busines	e in Floride. The alternate	name must include "Limited
Lizbility Company," "L.L.C	C," or "LLC.")	or heithering position		mane higst hivinge - Enninge
2	·	3. 47-1629849		
(Jurisdiction under the lay company is organized)	w of which foreign limited liability		(FEI number, if applic	able)
4. Upon filing				
······································	(Date first transacted business (See sections 605,0904 & 605.0	in Ploride, if prior to	registration.)	
5 120 North Lime Stree		YON PART O GROUNIN	bounting traditities	
5				
Lancaster, PA 17602				
BO D 1978	(Street Address of Pri	ncipal Office)	•	
6. PO Box 1268		······		
Lancaster, PA 17608				
······································	(Mailing Ad	dresa)	·····	
7. Name and street addres	ss of Florida registered agent: (P.O	. Box NOT accepts	ible)	A II: 51 OF STATE
	C T Corporation System			RA 5
Name:	······································			
Office Address:	1200 South Pine Island Road		•	
	Plantation		Plorida 33324	
Registered agent's accep	. (City)		(Zip code)	
designated in this applica to complywith the provision accept the obligations of t		ent as registered ag oper and complete m	ent and agree to act in	this capacity. I further ag
	(iseglete)e	d agent's signature)		
8. The nume, title or capa	wity and address of the person(s) wi	10 has/have authorit	y to manage is/are:	
Irex Corporation - Membe	er - 120 North Lime Street, Lancaste	r, PA 17602	<u>·</u>	
John L. Banks - Manager	- 120 North Lime Street, Lancaster,	PA 17602		
Emma K. Wolfe - Manage	er - 120 North Linus Street, Lancaste	PA 17602		
			····	
		ficate is in a foreign	l language, a translation	
	- K.	an authorized person		
•.	Signature of	an authorized person		
This document is executed aubinitized in a document to	in accordance with section 605.020 the Dopartment of State constitutes	3 (1) (b), Florida St a third degree felon	atutes. I am aware that a y as provided for in s.8	any false information 17.155, F.S.
	Bmma K. Wolfe		•	
· · ·	Typed or print	od name of signee		

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENPRO INDUSTRIAL SERVICES LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW,, AS OF THE THIRTIETH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 202592431 Date: 06-30-16

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