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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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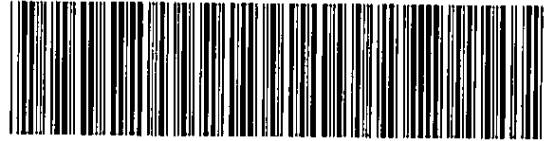
(Business Entity Name)

(Document Number)

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N CULLIGAN

AUG 28 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ResTec Solutions LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Carolyn Sauer
Name of Person

ResTec Solutions LLC
Firm Company

P.O. Box 11
Address

Glenshaw Pa 15116
City/State and Zip Code

csauer@restecs.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROLYN SAUER at 412 , 418-8808
Name of Contact Person Area Code Daytime Telephone Number

→ **MAILING ADDRESS:**
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is ☒ check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy |
|---|--|---|--|

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ResTec Solutions LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Pennsylvania 3. 45-4089481
(Jurisdiction under the law of which foreign limited liability company is organized) (EIN number, if applicable)

4. August 1, 2018
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0001 & 605.0005, F.S. to determine penalty liability)

5. 11350 Sw Village Parkway 6. P.O. Box 11
(Street Address of Principal Office) (Mailing Address)
Port St. Lucie FL 34987 Glenshaw Pa 15116

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Paul Baumgartner
Office Address: 11350 SW Village Parkway
Port St. Lucie Florida 34987
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

✓ Paul Baumgartner
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>CEO</u>	<u>Currie Crockett</u> <u>313014 Mill Road</u> <u>Pittsburg Pa 15238</u>	<u>COO</u>	<u>Paul Baumgartner</u> <u>11405 SW 6th Terrace CT.</u> <u>Port St. Lucie FL 34987</u>

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

✓ Paul Baumgartner
(Signature of an authorized person)

Paul Baumgartner
(Printed name of signer)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

08/06/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ResTec Solutions 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 Pennsylvania are paid.



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

Robert Lanes

Acting Secretary of the Commonwealth

Certification Number: TSC180806080076-1

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