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From:

: C T CORPORATION SYSTEM Account Name

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(850)205-8842

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FLORIDA PROFIT/NON PROFIT CORPORATION

Robinson Machine Company

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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: ROBIN	SON MACHINE COMPANY			
Scholer	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation an	d a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	Shaun Fleming			
	Name (Printed or typed)			
	301 Grant St., Flr. 20			
	Address			
	Pittsburgh, PA 15219			
	City, State & Zip			
	412-562-1588			
•	Daytime Telephone number			
	doug.bollinger@robinsonfuns.com			
	E-mail address: (to be used for future annual report notification)			

NOTE: Please provide the original and one copy of the articles.

16 SEP 28 AM 8: 34

TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

JBM PRI	NCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
binson Drive			
ny, PA 16037			
LEIII PUR pose for whic	POSE h the corporation is organized is:	anufacturing busine	ss ·
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Name an	d Title:Name and	Title:
Address	Address:	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the registere	ed agent is:
Name:	Dan Codispot	
Address:	3955 Drane Field Rd.	
	Lakeland, FL 33811	
ARTICLE VII	INCORPORATOR	
The name and ad	diress of the Incorporator is:	
Name:	Shaun Fleming	
Address:	301 Grant St., Fir. 20	
	Pittsburgh, PA 15219	
Effective date, if of [If an affective didays after the fill Note: If the date the document's of Itaving been name.	ate is listed, the date must be specific and cannot be more th	ng requirements, this date will not be listed as e stated corporation at the place designated in
IAIS CETUFICATE, 1 a	m jamuus wan uru uxeyi ine appoiniment as regineren ageni	
	Required Signature/Registered Agent	9/23/2016 Date
	required Signature prezistered regets. The partial and affirm that the facts stated herein are true. I am an experiment of state constitutes a third degree felony as provided.	rare that the false information submitted in a
The	Shaun Fleming	9/23/2016
Requir	ed Signature/Incorporator	Data