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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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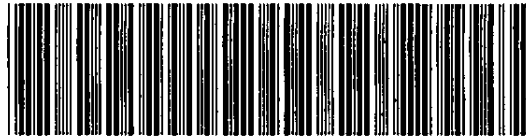
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

FEB 25 2016  
J. HARRIS



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NEW HOLLAND  
LEOLA  
MOUNT CARMEL  
LITITZ  
MANHEIM

February 16, 2016

Registration Section  
Division of Corporations Division of Corporations  
Clifton Building  
P.O. Box 6327  
2661 Executive Center Circle  
Tallahassee, FL 32314

RE: Application By Foreign Corporation For Authorization To  
Transact Business In Florida  
Adcock Brothers, Inc.  
Our File No. 2535.11

Dear Sir/Madam:

I have enclosed an original and one (1) copy of an Application By Foreign Corporation For Authorization To Transact Business In Florida along with a Certificate of Good Standing from the Commonwealth of Pennsylvania and a check in the amount of \$70.00 made payable to the Florida Department of State for the registration of the above referenced Corporation.

Please return the copy of the Application and Acknowledgement to my office in the enclosed stamped, self-addressed envelope. Thank you for your attention to this matter.

Sincerely,

Nicholas T. Gard

NTG:swe  
Enclosures  
cc: Adcock Brothers, Inc.

☒ NEW HOLLAND

912 West Main Street  
Suite 402  
New Holland, PA 17557  
Phone: 717.656.6717  
Fax: 717.656.8174

☐ LEOLA

49 East Main Street  
P.O. Box 218  
Leola, PA 17540  
Phone: 717.656.6717  
Fax: 717.656.4704

☐ MOUNT CARMEL

105 South Oak Street  
Mount Carmel, PA 17851  
Phone: 570.339.2558  
Fax: 570.339.2666

☐ LITITZ

662 Furnace Hills Pike  
Lititz, PA 17543  
Phone: 717.626.3434  
Fax: 717.626.3436

☐ MANHEIM

24 South Main Street  
Manheim, PA 17545  
Phone: 717.665.5979  
Fax: 717.665.1961

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Adcock Brothers, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Stephanie Waller Eshleman, Paralegal

Name of Person

Smoker Gard Associates LLP

Firm/Company

912 West Main Street, Suite 402

Address

New Holland, PA 17557

City/State and Zip code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Waller Eshleman, Paralegal

at ( 717 ) 656-6717

Name of Person

Area Code

Daytime Telephone Number

### STREET/COURIER ADDRESS:

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

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

Adecock Brothers, Inc.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. \_\_\_\_\_ 3. \_\_\_\_\_  
Pennsylvania 23-1874314  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. \_\_\_\_\_ 5. \_\_\_\_\_  
03/26/1972  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. \_\_\_\_\_  
14 Anthony Drive, Manheim PA 17545  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Christopher Young


Office Address: 200 Harrison Ave.

Panama City \_\_\_\_\_, Florida 32401  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*

  
\_\_\_\_\_  
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Robert J. Adcock

Address: 970 Fruitville Pike, Lititz PA 17543

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Robert J. Adcock

Address: 14 Anthony Drive, Manheim PA 17545

Vice President: Danielle Stine

Address: 502 Wellesley Cr., Lititz PA 17543

Secretary: Deborah Adcock

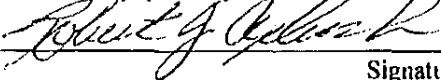
Address: 970 Fruitville Pike, Lititz PA 17543

Treasurer: Danielle Stine

Address: 502 Wellesley Cr., Lititz PA 17543

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**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Robert J. Adcock  
(Typed or printed name and capacity of person signing application)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

SECTION 11.B CONTINUED

Co-Vice President: Christopher Young

Address: 2866 Tupelo Drive, Panama City Florida 32405

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

02/16/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ADCOCK BROTHERS, INC.

is duly registered as a Pennsylvania Business Corporation 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

*Pedro C. Contes*

Secretary of the Commonwealth

Certification Number: TSC160216090056-1

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