CO200000004636 TO: Registration Section

| Division of Corporations | |
|--|--|
| SUBJECT: Newcomer Associates Inc | , |
| (Name of corporation | - must include suffix) |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for Ast "Certificate of Existence", and check are submitted to reg to transact business in Florida. | athorization to Transact Business in Florida", ister the above referenced foreign corporation |
| Please return all correspondence concerning this matter to | the following: |
| Linda Brechbill | 7 757 |
| (Name of Pe | erson) 9 GX m |
| Newcomer Associates Inc | A Property |
| (Firm/Comp | oany) : Fr |
| 1105 Sheller Avenue | - 5 |
| (Address | |
| Chambersburg PA 17201 | F02-4636 |
| (City/State and | Zip code) |
| For further information concerning this matter, please call | 5000075964255 -09/09/0201053007 : *****70.00 ******70.00 |
| Linda Brechbill at (717) | 263-4621 |
| (Name of Person) (Area Co | de & Daytime Telephone Number) |
| Registration Section Division of Corporations 409 E. Gaines St. | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, FL 32314 |
| | 78.75 Filing Fee & Sertified Copy Sertified Copy Certified Copy Certified Copy |

ÀPPLICATION 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.

| 1. | Newcomer Associates, Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) | : |
|----|--|----------------|
| 2. | Pennsylvania 3. 25-1409836 | . <u> </u> |
| | (State or country under the law of which it is incorporated) (FEI number, if applicable) | ~= |
| 4. | 9/8/81 5. perpetual | =_ |
| | (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") | |
| 6. | upon qualification | . |
| | (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) | - |
| 7. | 1105 Sheller Avenue, Chambersburg PA 17201 역 호유 | |
| | (Principal office address) | .: |
| | 1105 Sheller Avenue, Chambersburg PA 17201 | 7 |
| | (Current mailing address) | = |
| 8. | To Offer and Perform Architectural and Engineering Services (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) | - 2 |
| 9. | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) | = |
| | Name: CT Corporation System | - |
| Of | ffice Address: 1200 South Pine Island Road | |
| | Plantation , Florida 33324 (City) (Zip code) | : = |
| | | |

10. 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.

MARGARET E. ROUTZAHN
Special Assistant Secretary

(Registered agent's signature)

11. 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.

12. Nâmes and business addresses of officers and/or directors:

| A. DIRECT | ORS | |
|---------------|--|--|
| Chairman: | Matt J. Runyon | |
| Address: | 1105 Sheller Avenue | |
| | Chambersburg PA 17201 | |
| Vice Chairman | l: | |
| | · · · · · · · · · · · · · · · · · · · | |
| | | |
| Director: | Thomas K: Jackson | |
| Address: | 1105 Sheller Avenue | |
| | Chambersburg PA 17201 | |
| Director: | Jennifer A. Greenlee | |
| Address: | 1105 Sheller Avenue | |
| | Chambersburg PA 17201 | |
| B. OFFICE | RS BY THE REPORT OF THE REPORT | |
| President: | Matt J. Runyon | |
| | 1105 Sheller Avenue | |
| | Chambersburg PA 17201 | |
| | | |
| | | |
| | | |
| Secretary: | Thomas K. Jackson | |
| Address: | 1105 Sheller Avenue, Chambersburg PA 17201 | |
| Freasurer: | Jennifer A. Greenlee | |
| Address: | 1105 Sheller Avenue, Chambersburg PA 17201 | |
| | | |
| NOTE: If ne | cessary, you may attach an addendum to the application listing additional officers and/or directors. | |
| 13. <u> </u> | Lance K. Jandon | |
| | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) | |
| 4 | Thomas K. Jackson, Secretary (Typed or printed name and capacity of person signing application) | |

COM-MONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

AUGUST 27, 2002

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

NEWCOMER ASSOCIATES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania

and remains a subsisting corporation so far as the records of this office show, as of the date herein.

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.

Secretary of the Commonwealth

JSOW