

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
F2500000920

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H25000058009 3)))



H250000580093ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (614)573-3996

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sca@skakoconcrete.com

FOREIGN PROFIT/NONPROFIT CORPORATION
Skako Concrete, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED
2025 FEB 14 PH 3:34
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2025 FEB 14 AM 11:34
APPROVED
AND
FILED

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.

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

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

2. PA 3. 95-3973842 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/24/2023 5. (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. 6421 Dekrane Drive Building 2 Coopersburg, PA. 18036 (Principal office street address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation FL 33324 (City) (Zip code)

2025 FEB 14 AM 11:34 APPROVED AND FILED

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.

C T Corporation System

By: Christine Keim (Registered agent's signature) Christine Keim Assistant Secretary

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Scott Zolotsky
 Vice Chairman Address: 6421 Dekrane Dr Bldg. 2
Coopersburg, PA. 18036-3068
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. [Signature] 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. Scott Zolotsky - Director of Operations
(Typed or printed name and capacity of person signing application)

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717-787-1057
dos.pa.gov/BusinessCharities

Regarding: Skako Concrete, Inc.
Request Type: Subsistence Certificate **Issuance Date:** February 10, 2025
Request No.: 050820616 **File No.:** 0003625751
Receipt No.: 001440949
Filing Type: Domestic Business Corporation
Filing Subtype: Business
Initial Filing Date: January 24, 2023
Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

Skako Concrete, Inc.

is currently subsisting on the records of the Department of State as of the issuance 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 my office to be affixed, the day and year above written

A handwritten signature in black ink, appearing to read 'Albert Schmidt'.

Albert Schmidt
Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov