Filing and License Fee: \$310.00 minimum

ID Number: WOV



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

FILED

JAN 0 4 2007

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY						
Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the und	lersign ed fo					

cc th	rpora e follo	tion hereby applie wing statement:	s for a Cer	tificate of Author	ty to transact b	usiness in the State of Rhode	Island, and for that purpose submits
1	The	name of the corpo	ration is	EMPIRE PUBLIC	CATIONS, INC.		
2.	It is i	ncorporated under	r the laws o	Pennsylvani	a		
3.	The	name, if different,	which it ele	ects to use in Rho	ode Island is:		
	(a)	If the name of "incorporated," o above corporate	he word "corporation," "company." tion with the addition of one of the				
	(b)	If the corporate r qualify and trans application:	name is noi sact busine	t available in Rho ess in Rhode Isl	ode Island, then and as stated	set forth below the fictitious na in the *Fictitious Business Nai	me under which the corporation will me Statement" to be filed with this
4.	The	date of its incorpor	ation is	January 1, 1989		_ and the period of its duration	is Perpetual
5.	The	address of its princ	cipal office	in the state or co	untry under the	laws of which it is incorporated	A16D Groom Lane
		ol, PA 19007	•	· · · · · · · · · · · · · · · · · · ·	,		
6.		rovidence		tered office in Rh	02903		e ct, Suite 900 Idress, <u>not</u> P.O. Box) registered agent in Rhode Island at
		(City/Tov			(Zip Code)		
	tnat	address is Ma	ark P.	Dolan	(Name	e of Agent)	
7	The	DUIDAGE OF DUIDAGE	as which it	proposes to succ		action of business in Rhode Isla	
•		of advertising	es willer it	proposes to purs	iue iii ine transi	action of business in Knode Isla	no are:
					 		
8.		he names and res		dresses of its dire	ectors (optional	unless directors are required u	nder the laws of the state or country
				<u>Name</u>		Add	ress
	D	irector _	isa Onad	<u>/</u>	4160	O Green Lane, Bristol, PA 190	07
		irector _					
		irector _				·	
	U	irector					

Form No. 150 Revised: 12/05

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(nd respective addre y of which it is incor		officers (mandatory if dire	ctors are not required under the li	aws of the
	President	<u>Name</u> Lisa Onady		<u>Address</u> 416D Green Lane, Bristol, PA 19007		
Vice President Treasurer Secretary		Lisa Unady B		416D Green Lane, Bristol, PA 19007 416D Green Lane, Bristol, PA 19007		
9 -	The aggregate nun	nber of shares whic		ssue, itemized by classes,	par value of shares, shares without	par value,
(and series, if any, v	·			Par Value or Statement t	
-	Number of	Shares	<u>Class</u>	<u>Series</u>	Shares are without Par Va	alue •
10. ((a) An estimate of \$\frac{310,00}{}		property to be ow	ned by the corporation fo	or the following year, wherever loc	ated, is
((b) An estimate of \$_0.00	of the value of the	corporation's prope	erty to be located within	Rhode Island during the following	year is
(located within t	expressed as a per this state during the wherever located,	following year bears	to the value of all property	ralue of the property of the corpora y of the corporation to be owned du nulliply by 100 to obtain the percent	iring the
11. ((a) An estimate of \$\\\ 2,200,0\\		nt of business to b	pe transacted by the co	rporation during the following	year is
((b) An estimate of Island during t	of the gross amou he following year is	nt of business to be \$ 10,000.00	transacted by the corporal	tion at or from places of business in	Rhode
(corporation at	or from places of b by the comporation o	usiness in this state	during the following year b	mount of business to be transact ears to the gross amount thereof wi vide (b) by (a) and multiply by 100	hich will
	This application is a of which it is incorp		ertificate of Good St	anding issued by the prope	r officer of the state or country unde	er the laws
13. T	This Application for than the 90 th day at	Certificate of Authorite the date of this	ority shall be effective	e upon filing unless a spec	ified date is provided which shall be	e no later
Date	a: <u>\ </u>	3-0b		examined this Application any accompanying at contained herein are true. Signature of Au Lisa Onady, President	ury, I declare and affirm that on for Certificate of Authority, tachments, and that all stee and correct. The Corporation of the Corporation of Authorized Officer	including atements

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

DECEMBER 27, 2006

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

EMPIRE PUBLICATIONS, 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

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