


**PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

|                                                                                                                                                                                                                             |                                                                                                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Return document by mail to:<br>Thomas Fenton Tyree<br>_____<br>Name<br>_____<br>Address<br>_____<br>City                                  State                                  Zip Code<br>_____ | <b>Registration of Fictitious Name</b><br>DSCB:54-311<br>(rev. 2/2017)<br><br><br>311 |
| <input checked="" type="checkbox"/> Return document by email to: _____                                                                                                                                                      |                                                                                                                                                                          |

Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$70

I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

1. The fictitious name is:  
 Troop 19

2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:  
 Troop 19 is a Scouts BSA troop chartered by GLDN Inc. Prefer parents to write checks to Troop 19 instead of GLDN

3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):

|                   |       |       |       |         |
|-------------------|-------|-------|-------|---------|
| _____             | _____ | _____ | _____ | Chester |
| Number and street | City  | State | Zip   | County  |

4. The name and address, including number and street, if any, of each individual interested in the business is:

| Name  | Number and Street | City | State | Zip |
|-------|-------------------|------|-------|-----|
| _____ |                   |      |       |     |
| _____ |                   |      |       |     |
| _____ |                   |      |       |     |

5. Each entity, other than an individual, interested in such business is (are):

| Name                         | Form of Organization             | Organizing Jurisdiction |
|------------------------------|----------------------------------|-------------------------|
| GLDN Inc.                    | 501(c)(3) Non-profit corporation | Pennsylvania            |
| Principal Office Address     |                                  |                         |
| PA Registered Office, if any |                                  |                         |
| Name                         | Form of Organization             | Organizing Jurisdiction |
| Principal Office Address     |                                  |                         |
| PA Registered Office, if any |                                  |                         |

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

Thomas Fenton Tyree

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

18 day of December, 2022

Individual Signature

Individual Signature

Individual Signature

Individual Signature

GLDN Inc., DBA Troop 19

Entity Name

Entity Name

Signature

Signature

President, GLDN Inc., DBA Troop 19

Title

Title