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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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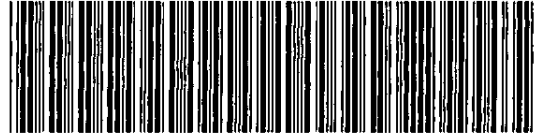
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
9/29

09-37309

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PILGRIM FARMS MANAGEMENT, 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," 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:

RODNEY P. ANDREWS

Name of Person

PILGRIM FARMS MANAGEMENT, INC

Firm/Company

16 REPUBLIC RD

Address

NORTH BILERICA MA 01862 USA

City/State and Zip code

pilfarms@hotmail.com

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

For further information concerning this matter, please call:

WILLIAM COLANGELI at (781) 275 8897 ext 12

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
09 AUG 28 AM 11:00
DIVISION OF CORPORATION

August 18, 2009

RODNEY P ANDREWS
PILGRIM FARMS MANAGEMENT, INC
6 REPUBLIC RD
NORTH BIUERICA, MA 01862

SUBJECT: PILGRIM FARMS MANAGEMENT, INC
Ref. Number: W09000037309

We have received your document for PILGRIM FARMS MANAGEMENT, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 509A00028031

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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. PILGRIM FARMS MANAGEMENT, 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. MASSACHUSETTS 3. 55-0871186
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/25/2004 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "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. 6 REPUBLIC RD NORTH BILLERICA MA 01862 USA
(Principal office address)

6 REPUBLIC RD NORTH BILLERICA MA 01862 USA
(Current mailing address)

8. A HORSE MANAGEMENT COMPANY
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: SCOTT ANDREWS

Office Address: 3694 NW PIN OAK CIRCLE

JENSEN BEACH, Florida 34975
(City) (Zip code)

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TALLAHASSEE FLORIDA

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.

Scott Andrews

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: RODNEY P. ANDREWS

Address: 1647 LOWELL RD #R1
CONCORD MA 01742 USA

Director: EDWARD W ANDREWS

Address: 146 ALDERSHOT LINE
CARLISLE MA 01741 USA

B. OFFICERS

President RODNEY P. ANDREWS

Address: 1647 LOWELL RD #R1
CONCORD MA 01742 USA

Vice President: _____

Address: _____

Secretary: EDWARD W. ANDREWS

Address: 146 ALDERSHOT LANE CARLISLE MA 01741 USA

Treasurer: RODNEY P. ANDREWS

Address: 1647 LOWELL RD #R1 CONCORD MA 01742 USA

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

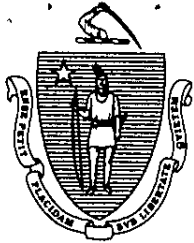
14. RODNEY P. ANDREWS

(Typed or printed name and capacity of person signing application)

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09 SEP 25 AM 9:11

SECRETARY OF STATE
TALLAHASSEE FLORIDA



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

September 8, 2009

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

PILGRIM FARMS MANAGEMENT, INC.

is a domestic corporation organized on **May 25, 2004**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth



Processed By: NEM

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TALLAHASSEE FLORIDA