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SECRETARY OF STATE
TALLAHASSEE FLORIDA

BL VORISEK

COVER LETTER

TO:	Co: Registration Section Division of Corporations					
SUBJ	ECT: Treif USA	A Inc.				
		Name of corpor	ation - mu	ist include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existenc	tion by Foreign Corporation te," or "Certificate of Good on corporation to transact by	Standing	" and check are sub		
Please	return all corresp	ondence concerning this m	atter to th	ne following:		
Ray Al	bramson					
		Nam	e of Perso	n		
Abram	son & Company L	LC				
		Firm/	Company			
60 Chu	irch Lane					
		A	ddress			
Westpo	ort, CT 06880					
		City/St	ate and Zi	p code		
rav@al	bramsonco.com	E-mail address: (to be u	sad for fu	tura annual raport r	ratification)	
				tate annual report	notification)	
For fu	rther information	concerning this matter, ple	ase call:			
Ray Al	Ray Abramson at (203) 852-1099					
Name of Person at (203 Area		 /	Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	sed is a check for	the following amount:				
\$70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & tified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

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. Treif USA, Inc			
	corporation; must include "INCORPORATED," Corp." "Inc." "Co." or "Corp.")	"COMPANY." "CORPORATION,"	
	,	•	
(If name unavai	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting business	s in Florida)
2. Delaware	3. 0	6-1348469	
(State or count	ry under the law of which it is incorporated)	(FEi number, if applicable)	
4. October 13, 199	5.		
(Dat	of incorporation)	(Date of duration, if other than perp	etual)
6. November 16. I	2013		
	(Date first transacted business in F (SEF SECTIONS 607.1501 & 607.150		
7,50 Waterview Dr	rive Suite 130 Shelton, CT 06484		
	(Principal	office address)	
	•		
	(Current mailing	address, if different)	
Name and <u>stre</u>	et address of Florida registered agent: (P.O.	Box NOT acceptable)	18 ALL
Name:	Corporation Service Company		NOV CRED
Office Address:	1201 Hays Street	<u> </u>	Assistant Assist
	Tallahassee	Florida 32301	
	(City)	, Florida <u>32301</u> (Zip code)	ξ.ς
0 0 1			表 7
	ent's acceptance: ned as registered agent and to accept service	e of process for the above stated corpor.	ation at the place
designated in this further agree to d	s application, I hereby accept the appointme comply with the provisions of all statutes rel	ent as registered agent and agree to act lative to the proper and complete perfor	in this capacity. 1
duties, and I am	fumiliar with and accept the obligations of i	my position as registered agent.	
	Jusan Eisthorn		
	(Registered ag	ent's signature)	

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. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: Director: __ Address: ___ Director: **B. OFFICERS** President: Guenter Becker Address: 36 Sasco Hill Terrace Fairfield, CT 06824 Address: Secretary: Lisa McEwan Address: 6 Coachmans Court Norwalk, CT 06850 Treasurer: Raymond Abramson Address: 42 Stony Brook Rd. Westport, CT 06880 NOTE: Enecessary, you may atach an addendum to the application listing additional officers and/or directors. Wansar 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. Raymond Abramson, Treasurer

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



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TREIF USA INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SECOND DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREIF USA INC."

WAS INCORPORATED ON THE THIRTIETH DAY OF OCTOBER, A.D. 1991.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203823741

Date: 11-02-18

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