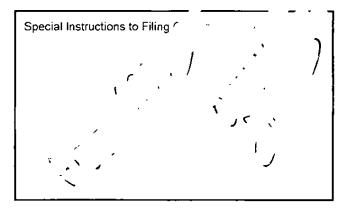
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status



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S. FRANKLIN JUN 15 2022

COVER LETTER

TO: Registration Section Division of Corporations		•	
SUBJECT: NEADS Inc) <u>.</u>		
	- <u>-</u> -	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporation	ificate of Good Stan	ding" and check are sub	et Business in Florida." mitted to register the
Please return all correspondence co Gerry DeRoche	ncerning this matter	to the following:	
	Name of	Person	20
NEADS Inc.			2022 11:17 10 PH 2: 1
	Firm/Com	• •	2
305 Redemption Ro	ock Trail So	uth	10
	Addre	SS	- Pi:
Princeton, MA 0154	.1		;
	City/State ar	id Zip code	0
gderoche@neads.o			
Ë-mail ad	ddress: (to be used for	or future annual report n	otification)
For further information concerning	this matter, please ca	ıll;	
Gerry DeRoche	_{at (} 978	₎ 563.1511	
Name of Person	Area Code	Daytime Teleph	none Number
STREET/COURIER ADD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
	DA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

orporation; must include "INCORPORATI	CIAC SOC	
orp," "Inc," "Co," or "Corp,")	лл, С	OMPANY," "CORPORATION,"
ible in Florida, enter alternate corporate na	me adop	ted for the purpose of transacting business in Florida)
nusetts	3	
y under the law of which it is incorporated		(FEI number, if applicable)
per 13, 1972	5	
of incorporation)		(Date of duration, if other than perpetual)
		<u> </u>
(Current ma	tiling ad	dress, if different)
		ox NOT acceptable) P1 2: 10
	of incorporation) (Date first transacted busines) (SEE SECTIONS 607.1501 & 60) emption Rock Trail So (Principal) (Current ma	y under the law of which it is incorporated)

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.

Registered agent'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.

A. DIRECTORS Name: A. Kim Saal Name: Gerry DeRoche □ Chairman □Chairman 155D West Main Street 143 Hunters Ridge Rd ☐ Vice Chairman □Vice Chairman Address: Little Compton Concord ☐ Director ☐ Director Rhode Island MA □President □President 02837 01742 □Vice President □Vice President □Treasurer □ Secretary □ Treasurer ☐ Secretary _{⊋Other} CEO Name: Scott Notargiacomo Name: Graham Chevry □Chairman □Chairman Address: 3 Dogwood Drive Address: _ 26 Pleasant Street □Vice Chairman □ Vice Chairman Grafton Duxbury □Director □ Director MA MA □ President □President 01519 02332 □ Vice President □ Vice President □ Secretary ☐ Treasurer □!Secretary Geoff Worrell James Hicks □ Chairman □Chairman 2 Peter Cooper Dr 51 Perry Henderson Dr : ∃Vice Chairman □ Vice Chairman Framingham Wareham Director Director MA Ma □President □President 01760 02571 □Vice President □Vice President □ Secretary □ Treasurer □ Secretary ☐ Treasurer 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 filed to the index when filing your Florida Department of State Annual Report form. 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.



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

March 9, 2022

TO WHOM IT MAY CONCERN:

I hereby certify that

NEW ENGLAND EDUCATIONAL CENTER SCHOLARSHIP AND LIBRARY FUND, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on September 13, 1972 (Chapter 180).

I also certify that by Articles of Amendment filed here January 11, 1985, the name of said corporation was changed to

HEARING EAR DOG PROGRAM, INC.

I further certify that by Articles of Amendment filed here **September 18, 1989**, the name of said corporation was changed to

NEW ENGLAND ASSISTANCE DOG SERVICE, INC.

I also certify that by Articles of Amendment filed here May 9, 1994, the name of said corporation was changed to

NATIONAL EDUCATION FOR ASSISTANCE DOG SERVICES, INC.

I further certify that by Articles of Amendment filed here March 30, 2018, the name of said corporation was changed to

NEADS INC.

I further certify that so far as appears of record here, said corporation still has legal existence.

In testimony of which.

I have hereunto affixed the

Great Scal of the Commonwealth

on the date first above written.

William Newin Gallerin
Secretary of the Commonwealth

