

M 230000014 894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

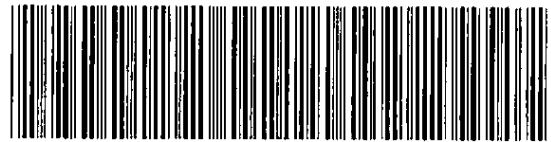
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 11 21 PM 1:51

S. ROBERTS

NOV 27 2023

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 138415 8143027

AUTHORIZATION :

RESUBMIT

COST LIMIT : \$ 125.00

Please give original
submission date as file date.

ORDER DATE : November 17, 2023

ORDER TIME : 2:17 PM

ORDER NO. : 138415-015

CUSTOMER NO: 8143027

FOREIGN FILINGS

NAME: BTX AIR EXPRESS OF
CONNECTICUT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 NOV 21 PM 3:11

RECEIVED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BTX AIR EXPRESS OF CONNECTICUT LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BETH SCHWARTZ

Name of Person

BTX AIR EXPRESS OF CONNECTICUT LLC

Firm/Company

12 COMMERCE DRIVE

Address

SHELTON, CT 06484

City/State and Zip Code

BSCHWARTZ@BTXGLOBAL.COM

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

For further information concerning this matter, please call:

BETH SCHWARTZ

203

9255905

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BTX AIR EXPRESS OF CONNECTICUT, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC."

2. CT 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 11/2/2023
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 12 COMMERCE DRIVE 6. _____
(Street Address of Principal Office) (Mailing Address)

SHELTON, CT 06484

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee 32301
(City) Florida (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Corporation Service Company

By: Eylima Baker Assistant Vice President

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
☒ Manager	Name:	MARTIN CAPUANO		☒ Manager	Name:	ROSARIO BACARELLA	
☐ Member	Address:	12 COMMERCE DRIVE		☐ Member	Address:	12 COMMERCE DRIVE	
☐ Authorized				☐ Authorized			
Person		SHELTON, CT 06484		Person		SHELTON, CT 06484	
☐ Other		☐ Other		☐ Other		☐ Other	
☐ Manager	Name:			☐ Manager	Name:		
☐ Member	Address:			☐ Member	Address:		
☐ Authorized				☐ Authorized			
Person				Person			
☐ Other		☐ Other		☐ Other		☐ Other	
☐ Manager	Name:			☐ Manager	Name:		
☐ Member	Address:			☐ Member	Address:		
☐ Authorized				☐ Authorized			
Person				Person			
☐ Other		☐ Other		☐ Other		☐ Other	

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 added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.



Signature of an authorized person

MARTIN CAPUANO - PRESIDENT/CFO

Typed or printed name of signer

Secretary of the State of Connecticut

Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Friday, November 17, 2023 4:38 PM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

Business Details

Business Name	BTX Air Express of Connecticut, LLC
Business ALEI	US-CT.BER:2885204
Formation Date	11/03/2023



Secretary of the State