

**F03000001263**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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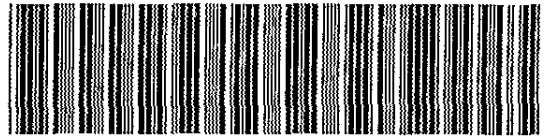
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*BK*

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INDUSTRIAL SAFETY & SUPPLY CO., 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:

WILLIAM MYLES  
(Name of Person)

INDUSTRIAL SAFETY & SUPPLY CO., INC  
(Firm/Company)

176 NEWINGTON RD  
(Address)

WEST HARTFORD CT 06110  
(City/State and Zip code)

For further information concerning this matter, please call:

ROGER ROACH at (860) 221 2629  
(Name of Person) (Area Code & Daytime Telephone Number)

OR WILLIAM MYLES 860 221 2648

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration 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

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AUG 13 AM 10:28  
TALLAHASSEE, FLORIDA

**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. INDUSTRIAL SAFETY & SUPPLY CO. INC  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. CONNECTICUT 3. 06-0618453  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1945 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 1/31/03  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 176 NEWINGTON RD WEST HARTFORD CT 06110  
(Principal office address)  
P.O. BOX 330720 WEST HARTFORD CT 06133-0720  
(Current mailing address)
8. SALE OF SAFETY, MAINTENANCE, TOOLS & EQUIPMENT & FAB PARTS  
(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 or Mail Drop Box NOT acceptable)  
Name: MONTY R. NALL  
Office Address: 5925 CARRIER STREET  
ST PETERSBURG, Florida 33714  
(City) (Zip code)
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.*
- MONTY R. NALL  
(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: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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MAR 18 AM 10:28  
SECRETARY OF STATE  
HALLMARK BUILDING  
TALLAHASSEE, FLORIDA

B. OFFICERS

President: WILLIAM BONK

Address: 176 NEWINGTON RD

WEST HARTFORD CT 06110

Vice President: JAMES BONK

Address: 176 NEWINGTON RD

WEST HARTFORD CT 06110


Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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



(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WILLIAM BONK

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

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,  
and keeper of the seal thereof, DO HEREBY CERTIFY, that

INDUSTRIAL SAFETY & SUPPLY CO. INC.

incorporated under the laws of Connecticut is in existence.

*Susan Bysiewicz*

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Secretary of the State

FILED  
03 MAR 13 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Date Issued: February 10, 2003