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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

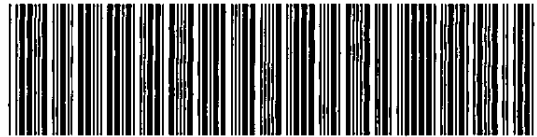
(Document Number)

Certified Copies _____

Certificates of Status _____

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2009 AUG 25 P 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 26 2009
D. A. WHITE

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2009 AUG 25 P 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Travis Realty, 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:

Maureen L. Roberts

Name of Person

Century 21 Travis Realty, Inc.

Firm/Company

630 Boston Road

Address

Billerica, MA 01821

City/State and Zip code

MaureenRobertsRE@gmail.com

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

For further information concerning this matter, please call:

Maureen Roberts

Name of Person

at (978) 667-2121, X 123

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

**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. Travis Realty, 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. 04-3429412
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 14, 1998 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Not Yet
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 630 Boston Road
(Principal office address)
Billerica, MA 01821
(Current mailing address)

8. Real Estate Brokerage
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

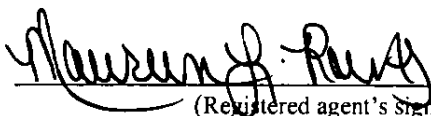
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Maureen L. Roberts

Office Address: 1795 Four Mile Cove Parkway, Unit 836
Cape Coral, Florida 33990
(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.


(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:

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A. DIRECTORS

Chairman: _____ 2009 AUG 25 P 12: 50

Address: _____ SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Paul D. Travis

Address: 10 Westmeadow Lane
N. Billerica, MA 01862

Vice President: Paul D. Travis

Address: 10 Westmeadow Lane
N. Billerica, MA 01862

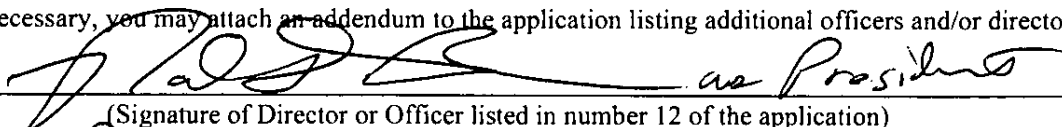
Secretary: Maureen L. Roberts

Address: 10 Westmeadow Lane, N. Billerica, MA 01862

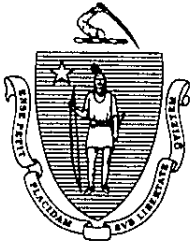
Treasurer: Paul D. Travis

Address: 10 Westmeadow Lane, N. Billerica, MA 01862

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

13.  as President
(Signature of Director or Officer listed in number 12 of the application)

14. Paul D Travis as President
(Typed or printed name and capacity of person signing application)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

August 18, 2009

TO WHOM IT MAY CONCERN:

I hereby certify that according to records in this office,

TRAVIS REALTY, INC.

was incorporated under the General Laws of this Commonwealth on **August 14, 1998**.

I further certify that no amendments to the Articles of Organization appear of record here and said corporation still has legal existence.

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2009 AUG 25 P 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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