

F10000003152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400182985434

~~400182985434~~
07/12/10--01058--001 **70.00

FILED
10 JUL 12 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8:44 AM JUL 14 2010



July 9, 2010

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: ManSci Inc.

Dear Filing Officer:

Please file the attached Application for Authority for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,


Linda Stauffer
Client Specialist

Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ManSci 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:

Linda Stauffer

(Name of Person)

NRAI Corporate Services

(Firm/Company)

16055 Space Center Blvd., Suite 235

(Address)

Houston, Texas 77062

(City/State and Zip code)

For further information concerning this matter, please call:

Linda Stauffer

at (800) 862-5438

(Name of Person)

(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. ManSci 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. Delaware 3. 202781339
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/19/2005 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 600 Main Street, Tonawanda, NY 14150
(Principal office address)
- 2 Admiral Place, Guelph, ON N1G 4N4
(Current mailing address)
8. Distribution of Analytical and Life Science Products
(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: NRAI Services, Inc.
- Office Address: 2731 Executive Park Dr., Ste 4
- Weston, Florida 33331
(City) (Zip code)

FILED
10 JUL 12 PM 4:28
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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.

NRAI Services, Inc.



(Registered agent's signature) Linda Stauffer, Asst. Secy.

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: Edward Godman

Address: 2 Admiral Place

Guelph, ON N1G 4N4

Director: Michael Cauley

Address: 2 Admiral Place

Guelph, ON N1G 4N4

B. OFFICERS

President: Michael Cauley

Address: 2 Admiral Place

Guelph, ON N1G 4N4

Vice President: Edward Godman

Address: 2 Admiral Place

Guelph, ON N1G 4N4

Secretary: Barbara Humm

Address: 2 Admiral Place, Guelph, ON N1G 4N4

Treasurer: Barbara Humm

Address: 2 Admiral Place, Guelph, ON N1G 4N4

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Michael Cauley, President

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

FILED
10 JUL 12 PM 4:28
SECTION 5
TALLAHASSEE, FLORIDA

ManSci Inc.

Additional Director

Barbara Humm
2 Admiral Place, Guelph, ON N1G 4N

FILED
10 JUL 12 PM 4:28
ST. JAMES
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANSCI 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 NINTH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MANSCI INC." WAS INCORPORATED ON THE NINETEENTH DAY OF APRIL, A.D. 2005.

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

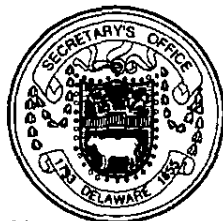
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

FILED
10 JUL 12 PM 4:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

3956996 8300

100728666

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8103676

DATE: 07-09-10