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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(,
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Chariel Instructions to Filing Officer
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SECRETARY OF STATE



TO: New Filing Sec Division of Cor						
SUBJECT:	Newell Brown Name of cor	poration - mus			Monster	Movers
Dear Sir or Madam:						
Dear Bir or Madami.						
The enclosed "Applicate "Certificate of Existence above referenced foreign	e," or "Certificate of Go	ood Standing"	and check are			•
Please return all corresp	ondence concerning thi	s matter to the	following:			
Willia	am Antono		(Vice	e Pres	ident)	
Newell	Brothers	Inc.	OBA	Monst	er Mover	<u>5</u>
	_					
12	Jacques	Street	Unit	3		
Worce	ster No	Address O \6	03			
	City	/State and Zip	code			
Mon	Stermouers E-mail address: (to b	S M5 ∫ . De used for futu	COM ire annual rep	oort notific	eation)	
For further information						
Name of Person	tonelli at (508) Area Code &	75 1 - 6 z Daytime Te	769 elephone N	lumber	
STREET/COU New Filing Sect Division of Cor Clifton Building 2661 Executive	porations S		New Filit Division P.O. Box	IG ADDR ng Section of Corpora 6327 ee, FL 32	ations	
Tallahassee, FL	32301					
Enclosed is a check for	he following amount:					
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee Certificate of Stat		75 Filing Fee fied Copy	& X	\$87.50 Filing Fee Certificate of Sta Certified Copy	

${\bf \hat{i}}$ APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

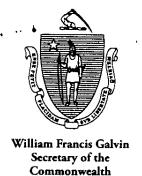
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	-
1. Newell Brothers, Inc.	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	SEP
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	30
	2
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	f.
2. Massachusetts 3. 202827359	30
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. May 9 th 2005 (Date of incorporation) 5. "Perpetual" (Duration: Year corp. will cease to exist or "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. 12 Jacques Street Worcester Ma. 01603	
(Principal office address)	
12 Jacques Street Worcester Ma. 01603 (Current mailing address)	
(Current mailing address)	
8. Moving of Household Goods	
(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: William Antonelli	
Office Address: 1050 Lake Berkley Drive	
Kissimmee, Florida 34746 (City) (Zip code)	
(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 pla designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit	
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my d	
and I am familiar with and accept the obligations of my position as registered agent.	
(Registered agent's signature)	
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

A. DIRECT	CURS		
Chairman:	Scott Newell		
Address:	288 Mechanic Street		
	Marlborough, Ma. 01752		3 0 S
Vice Chairman	n:		30
Address:	! 		<u></u>
		33	4: 3
Director:	7	5 (11)	30
Address:			···
Director:			
			
B. OFFICE	RS		
	288 Mechanic		
	Marlborough Ma. 01752		
	: William Antonelli		
Address:	1050 Lake Berkley Drive		
	Kissimmee FL. 34746		
Secretary:	Scott Newell		
Address:	288 Mechanic Street Marlburough, Ma 01752.		
Treasurer:	William Antonelli		
Address:	1050 Lake Berkley Drive Kissimmee FL. 34	<u> 146</u>	·
NOTE IC			
NOTE: If ne	ecessary, you may attach an addendum to the application listing additional officers and/or directors	8.	
13	(Signature of Director or Officer listed in number 12 of the application)		
14	William Antonelli Vice President		
14	(Typed or printed name and capacity of person signing application)		



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02188

September 22, 2010

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

NEWELL BROTHERS, INC.

is a domestic corporation organized on May 9, 2005, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Processed By: njm