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SECRETARY OF STATE TALLAHASSEE FLORIDA



MR)

### **COVER LETTER**

	New Filing Section Division of Corporations
SUBJE	CT: ThomasPartners, Inc.
	Name of corporation - must include suffix
Dear Sir	or Madam:
"Certification	osed "Application by Foreign Corporation for Authorization to Transact Business in Florida," ate of Existence," or "Certificate of Good Standing" and check are submitted to register the ferenced foreign corporation to transact business in Florida.
Please re	eturn all correspondence concerning this matter to the following:
Gerald	d Mueller, Treasurer
	Name of Person
Thom	nasPartners, Inc.
	Firm/Company
75 Ce	entral St.
	Address
Welles	sley, MA 02482
	City/State and Zip code
jerry@	thomaspartnersinc.com  E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
Gerald	d Mueller at ( 781 ) 431-1430
	Name of Person Area Code & Daytime Telephone Number
N D C 2	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed	is a check for the following amount:
<b>✓</b> \$70.	.00 Filing Fee \$\ \text{Certificate of Status} \text{ \$\ \text{S78.75 Filing Fee & Certified Copy} } \text{ \$\ \text{S87.50 Filing Fee, Certified Copy} \text{ \$\ \text{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. ThomasPartr				1
	corporation; must include "INCORPORATE forp," "Inc," "Co," or "Corp.")	E <b>D</b> ,""	COMPANY," "CORPORATION,	,,
(If name unavail	able in Florida, enter alternate corporate na	me ad	opted for the purpose of transacting	business in Florida)
2. Massachuse	tts	3 0	4-2489016	
- · · · · · · · · · · · · · · · · · · ·	under the law of which it is incorporated)	,	(FEI number, if applied	cable)
4. July 31, 197	70	5. P	erpetual	
· · · · · · · · · · · · · · · · · · ·	e of incorporation)	(1	Duration: Year corp. will cease to e	exist or "perpetual")
6				
	`		lorida, if prior to registration) , F.S., to determine penalty liability	ν)
75 Control	`	7.1502	, 1.5., to determine penarty massing	,,
7. 75 Central	St., Wellesley, MA 02482 (Principal office a	addres	3)	
same	(		,	
Carrio	(Current mailing a	addres	s)	
	t Management			
(Purpose(s	s) of corporation authorized in home state or	r coun	try to be carried out in state of Flor	ida)
9. Name and stree	et address of Florida registered agent: (l	P.O. F	Box NOT acceptable)	755 0
Name:	Thomas Nash			100 No.
Office Address:	7225 Pelican Bay Blvd, #1802	 2	_	10 NOV 15 PH 12: 06 SECRETERY OF STATE TALL ANASSEE FLORID
Office Address.			– 34108	SEE PE
	Naples (City)		, Florida 34108 (Zip code)	2: C
	•		(P +0-0)	設定
10. Registered as	gent's acceptance:		- Commence Complete and accompany	

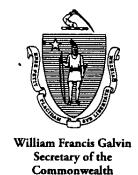
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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: FILED A. DIRECTORS Chairman: Gregory Thomas Address: 950 Horse Ranch Dr. Snowmass Village, CO 81615 Vice Chairman: Address: Director: William McMahon Address: 3 Stony Brook Rd. Hudson, MA 01749 Director: Gerald Mueller Address: 20 Deerhaven Rd Lincoln, MA 01773 B. OFFICERS President: William McMahon Address: 3 Stony Brook Rd. Hudson, MA 01749 Vice President: Amos Robinson Address: 19 Overlake View Williston, VT 05495 Secretary: Gerald Mueller Address: 20 Deerhaven Rd., Lincoln, MA 01773 Treasurer: Gerald Mueller Address: 20 Deerhaven Rd., Lincoln, MA 01773 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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. 14. Gerald Mueller, Treasurer

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



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

November 1, 2010

TO WHOM IT MAY CONCERN:

I hereby certify that according to records in this office,

#### SHOREY-HUNTINGTON CORPORATION

was incorporated under the General Laws of this Commonwealth on July 31, 1970.

I also certify that in Articles of Amendment filed here April 23, 2004, the name of said corporation was changed to:

#### THOMASPARTNERS, INC.

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



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Mein Travino Galecin