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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

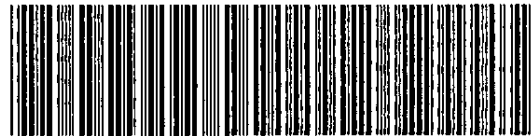
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STATE OF FLORIDA  
TALLAHASSEE

T. Burch FEB 3 2011

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Signature Breads, 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," or "Certificate of Good Standing" 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:

James J. Dowd

Name of Person

Vasil & Dowd

Firm/Company

30 Church Street, Suite 310

Address

Belmont, MA 02478

City/State and Zip code

jdowd@vasildowd.com

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

For further information concerning this matter, please call:

James Dowd

Name of Person

at ( 617 ) 484-0000

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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. SIGNATURE BREADS, 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

(State or country under the law of which it is incorporated)

3. 02-0785021

(FEI number, if applicable)

4. SEPTEMBER 29, 2006

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. JANUARY 20, 2011

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 100 JUSTIN DRIVE CHELSEA, MA 02150

(Principal office address)

100 JUSTIN DRIVE CHELSEA, MA 02150

(Current mailing address)

8. SALES OFFICE

(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: CT Corporation System

Office Address: 1200 S. Pine Island Road

Plantation

(City)

Florida 33324

(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)

Kristen Betzger, Assistant  
Secretary

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.

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STATE  
TREASURY  
BOSTON, MA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: ANTHONY RODRIGUEZ

Address: 84 LONGMEADOW ROAD  
BELMONT, MA 02478

Vice Chairman: \_\_\_\_\_

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

Director: ANTHONY RODRIGUEZ

Address: 84 LONGMEADOW ROAD  
BELMONT, MA 02478

Director: JAMES DOWD

Address: 30 CHURCH STREET  
BELMONT, MA 02478

**B. OFFICERS**

President: ANTHONY RODRIGUEZ

Address: 84 LONGMEADOW ROAD  
BELMONT, MA 02478

Vice President: \_\_\_\_\_

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

Secretary: JOHN NEYLON

Address: 101 TREMONT STREET BOSTON, MA 02108

Treasurer: JAMES J DOWD

Address: 30 CHURCH STREET BELMONT MA 02478

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

13. \_\_\_\_\_

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. JAMES J DOWD, TREASURER

(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*

January 28, 2011

TO WHOM IT MAY CONCERN:

I hereby certify that

**SIGNATURE BREADS, INC.**

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **August 29, 2006**.

I also certify that so far as appears of record here, 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.

*William Francis Galvin*

Secretary of the Commonwealth

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