# F110000005548

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



500207925245

05/27/11--01913--006 \*\*70.00



BII MY 27 MI II: 27
SECRETARY OF STATE.

### **COVER LETTER**

TO: New Filing Section Division of Corporations						
SUBJECT: WHITMAN WOOD PRODUCTS, 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:						
PETER WETHERBEE						
Name of Person						
WHITMAN WOOD PRODUCTS, INC.						
Firm/Company						
5 OLD TOWN PARK ROAD  Address						
Address Address						
NEW MILFORD, CT 06776-4212  City/State and Zip code						
pwetherb@sbcglobal.net 27						
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
To traction information concerning this matter, prease can:						
KEVIN DUMAS     at (860)     355-2223       Name of Person     Area Code & Daytime Telephone Number						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother 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 \$78.75						

## 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.	WHITMAN WOOD PRODUCTS INC.	
(Eı	Inter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"In	nc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
<u></u>		
	f name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2	tate or country under the law of which it is incorporated)  3. O6-/2/983/  (FEI number, if applicable)	
4	// // // // 5. PERPETUAL (Date of incorporation)  (Duration: Year corp. will cease to exist or "perpetual")	
6	JANUARY 1, 2011	
	(Date first transacted business in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7	5 OLD TOWN PARK ROAD, NEW MILFORD, CT 06	776
	(Principal office address)	
	(Current mailing address)	
_	ENDLOYEE THUM IN ELDOUDD	
8	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
	(1 diposo(s) of corporation additionized in nome state of country to be carried out in state of Florida)	רו
9. Na	ame and street address of Florida registered agent: (P.O. Box NOT acceptable)	ATTERNATION OF THE PERSON OF T
	Name: PETER WHITMAN	_
	220 1111016 70116	7
Offic	the Address: 329 VILLAGE DRIVE  ST AUGUSTINE Florida 32084	3
	ST AUGUSTINE, Florida 32084 (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 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:			
A. DIREC	TORS			
Chairman: _				
Address:				
	•			
Vice Chairm	an:			
Director				
Address:				
Director:				
Address:				
_				
B. OFFIC	ERS			
President: _	PETER K. WETHERBEE			
	33 CHURCH ROAD	ALE	<b>E</b>	
	SHERMAN, CT 06784	AHA	亚	**
Vice Preside	nt:	(p) A	727	
		, tu	AM	m
Address,		95×	=	U
-	CRISTINA WETHERBEE	2	27	
	33 CHURCH ROAD, SHERMAN, CT 06			
Address:	os diferent florid ; shokimito ; et ou	7 6 4		
Treasurer: _				
Address:				
NOTE: If:	necessary from may attach an addendum to the application listing additional officers	and/or direc	ctors.	
13		<del></del>	<del></del>	
The officer	Signature of Director or Officer or director signing this document (and who is listed in number 12 above) affirms that	it the facts s	tated he	rein
are true and	that he or she is aware that false information submitted in a document to the Departs elony as provided for in s.817.155, F.S.	ment of Stat	e const	itutes a
14	Peter Wetlerhee Dreident			

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

#### Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

#### WHITMAN WOOD PRODUCTS, INC.

a domestic STOCK corporation, was filed in this office on November 09, 1987, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Menk

Date Issued: April 29, 2011

SECRETARY OF STATE

Business ID: 0208358 Express Certificate Number: 2011113293001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov