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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/H

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PROFLOW 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:

KURT UHLEIN

Name of Person

PROFLOW INC

Firm/Company

303 STATE STREET

Address

NORTH HAVEN, CT 06473

City/State and Zip code

KURT-UHLEIN@PROFLOW-INC.COM

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

For further information concerning this matter, please call:

KURT UHLEIN

Name of Person

at (203) 230 4700

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. PROFLOW 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. CT

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

3. 06-0620488

(FEI number, if applicable)

4. 1946

(Date of incorporation)

5. perpetual

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

6. 11/19/2012

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

7. 303 STATE STREET NORTH HAVEN, CT

(Principal office address)

SAME

(Current mailing address)

8. EMPLOYEE WORKING OUT OF HOME IN FLORIDA

(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: AMY MEROLA

Office Address: 322 SW 28th AVE

DELRAY BEACH

(City)

Florida 33445

(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.

Amy J. Merola
(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:

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12 DEC -4 AM 11:02

A. DIRECTORS

Chairman: Kurt W. Uhlen

Address: 303 State St
North Haven, CT 06473

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Lawrence L. Bee Jr

Address: 303 State St
North Haven, CT 06473

Director: _____

Address: _____

B. OFFICERS

President: Kurt W. Uhlen

Address: _____

Vice President: Lawrence L. Bee Jr.

Address: _____

Secretary: Kurt W. Uhlen

Address: _____

Treasurer: _____

Address: _____

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. Kurt W. Uhlen, President
(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

PROFLOW INC.

a domestic STOCK corporation, was filed in this office on October 23, 1946, 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

Date Issued: November 16, 2012

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SECRETARY OF STATE
HALLAMASSE, FLORIDA