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PICK-UP	☐ WAIT	MAIL				
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2013

THOMAS BEROBE 44 MERRIMAC STREET NEWBURYPORT, MA 01950

SUBJECT: STREETDELIVERY.COM.INC.

Ref. Number: W13000067410

RECEIVED

13 DES 23 PM 12: 27

SEGNETARY OF STATE

We have received your document for STREETDELIVERY.COM.INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$2,000.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 613A00028049

Division of Comparations D.O. POV 6297 Tollahosson Florida 2921

		C	OVER LE	TTER	
TO:	New Filing Sect Division of Corp		StreetDelivery.com, Inc. 44 Merrimac St Newburyport, MA 01950		
SUBJ	JECT:				
		Name o	f corporation -	must include suffix	
Dear S	Sir or Madam:				
"Certi		e," or "Certificate	of Good Stand	ing" and check are s	sact Business in Florida," submitted to register the
Please	return all corresp	ondence concerni	ng this matter t	o the following:	
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For fu	rther information	concerning this ma	atter, please ca	11:	
<u>2</u> )	Name of Person			) 463 - 5 ode & Daytime Tele	831 Xt. 723
				-	•
STREET/COURIER ADDRESS: New Filing Section  MAILING ADDRESS: New Filing Section				Section	
Division of Corporations		Division of Corporations P.O. Box 6327			
	Clifton Building 2661 Executive			Tallahassee	
	Tallahassee, FL				,
Enclos	sed is a check for t	the following amo	unt:		\
<b>5</b> 7	0.00 Filing Fee	□ \$78.75 Filing		\$78.75 Filing Fee &	\$87.50 Filing Fee,

Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Plorida, enter alternate corporate name adopted for the purpose of transacting business in Plorida (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual") Date of incorporation (Date first transacted business in Plorida, if prior to registration) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability) urrent mailing address (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: 1 Cypress Landing Dr Office Address: 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.

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 Chairman: Address: \_ Vice Chairman: \_\_\_\_ Address: \_\_\_ Address: Director: Address: \_ **B. OFFICERS** Address: Secretary: Address: CHANDLER ST. HI BOSTON MA. OZIIC 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. 1 homas

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



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

Date: December 02, 2013

To Whom It May Concern:

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

STREETDELIVERY.COM, INC.

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

Francis Galein

Certificate Number: 13125210310

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: tad