

F14000002539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

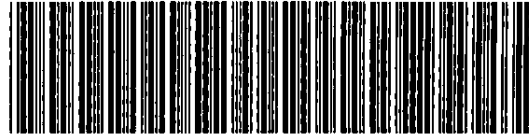
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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547 -

W14000033001



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14 JUN 11 PM 4:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6/12/14

## COVER LETTER

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

**SUBJECT:**

Tomaida 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:

Thomas Wentworth  
Name of Person

Tomaida Inc.  
Firm/Company

170 John Rezza Dr.  
Address

N. Attleboro, MA 02763  
City/State and Zip code

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

For further information concerning this matter, please call:

Manuel Derosa at ( 508 ) 977-4872  
Name of Person 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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 JUN 11 AM 10:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

May 27, 2014

THOMAS G. WENTWORTH  
170 JOHN REZZA DRIVE  
N. ATTLEBORO, MA 02763

SUBJECT: TOMAIDA INC  
Ref. Number: W14000033001

We have received your document for TOMAIDA INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 114A00011393

See attached.  
It is printed.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. Tomaida 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 3. 46-5467163  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 1, 2014 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. May 1, 2014  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 170 John Rezza Dr N. Attleboro, MA 02763  
(Principal office address)

Same  
(Current mailing address)

8. Internet Sales  
(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)

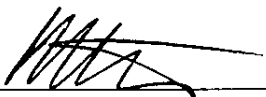
Name: Thomas Wentworth

Office Address: 50989 Highway 27  
Davenport, Florida 33897  
(City) (Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. DIRECTORS

Chairman: Thomas G. Wentworth FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Address: 170 John Rezza Dr.  
N. Attleboro, MA 02763  
Vice Chairman: Aida Wentworth  
Address: 170 John Rezza Dr.  
N. Attleboro, MA 02763  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_

B. OFFICERS

President: THOMAS WENTWORTH  
Address: 170 JOHN REZZA DR.  
N. ATTLEBORO MA 02763  
Vice President: AIDA WENTWORTH  
Address: 170 JOHN REZZA DR.  
N. ATTLEBORO MA 02763  
Secretary: Aida Wentworth  
Address: 170 John Rezza Dr. N. Attleboro, MA 02763  
Treasurer: Thomas Wentworth  
Address: 170 John Rezza Dr. N. Attleboro, MA 02763

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

13.  Vice President  
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. AIDA WENTWORTH  
(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*

Date: May 08, 2014

To Whom It May Concern :

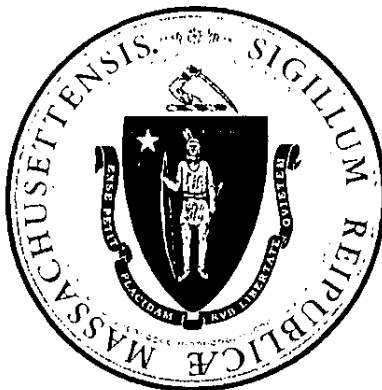
I hereby certify that,

**TOMAIDA INC**

appears by the records of this office to have been incorporated under the General Laws of this

Commonwealth on **April 25, 2014.**

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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Certificate Number: 14057462110

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

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