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9/10/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MACDERMID TRANSACTIONAL SERVICE COMPANY
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:

Sharon K. Gray

c/o
Name of Person

Tina Goff
**Sunshine Corporate & Filing
Services, Inc.
3458 Lakeshore Drive
Tallahassee, FL 32312**

Triad Professional Services, LLC

Firm/Company

1720 Windward Concourse, Ste. 390

Address

I will pickup

Alpharetta, GA 30005

City/State and Zip code

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

For further information concerning this matter, please call:

Tina (850) 508-1891 (1st)

Sharon K. Gray

at (770) 777-2091

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

**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. MACDERMID TRANSACTIONAL SERVICE COMPANY

(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. Delaware 3. 46-5678703
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/12/2014 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 245 Freight Street, Waterbury, CT 06702
(Principal office address)
245 Freight Street, Waterbury, CT 06702
(Current mailing address)

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DIVISION OF CORPORATIONS
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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

9. 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.

NRAI Services, Inc.
By: [Signature]
(Registered agent's signature)

Jennifer Parks, Assistant Secretary

10. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Frank Monteiro

Address: 245 Freight Street, Waterbury, CT 06702

John Cordani

Director: 245 Freight Street, Waterbury, CT 06702

Address: Michael Kennedy

245 Freight Street, Waterbury, CT 06702

B. OFFICERS

President: Frank Monteiro

Address: 245 Freight Street, Waterbury, CT 06702

Vice President: _____

Address: _____

Secretary: John Cordani

Address: 245 Freight Street, Waterbury, CT 06702

Treasurer: Michael Kennedy

Address: 245 Freight Street, Waterbury, CT 06702

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

12.  _____
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.

13. John Cordani, Secretary
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MACDERMID TRANSACTIONAL SERVICE COMPANY" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MACDERMID TRANSACTIONAL SERVICE COMPANY" WAS INCORPORATED ON THE TWELFTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5531726 8300

141153582

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1679072

DATE: 09-08-14