7/0003/06

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)			
		- 45		
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL.		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



900263671119

09/12/14--01039--010 **70.00

SECRETARY OF STATE
SALE SALES OF STATE
SALE SALES OF STATE
SALE SALES OF SALES
SALES
SALES OF SA

SEP 1 42018 S. GILBERT

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: BOOTHROYD DEWHU	JRST, INC.
	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star above referenced foreign corporation to transact business."	nding" and check are submitted to register the
Please return all correspondence concerning this matter. John Gilligan	r to the following:
Name of	Person
Boothroyd Dewhurst, Inc.	
Firm/Com	npany
Addro	ess
Wakefield, RI 02879	
•	and Zip code
JGILLIGAN@DFMA.COM	for future annual report notification)
·	•
For further information concerning this matter, please of	call:
John Gilligan at 401	, 783-5840 x102
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	3 \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.

(F)			
	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION	,"
			
	able in Florida, enter alternate corporate name	, , , ,	g business in Florida)
2. RHODE	ISLAND 3.	04-2810408	
,	y under the law of which it is incorporated)	(FEI number, if app	olicable)
_{4.} 8/26/198	5.	PERPETUAL	
(Date	e of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
6			
6		n Florida, if prior to registration)	v)
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liabilit	y)
	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I	502, F.S., to determine penalty liabilit RI 02879	у)
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liabilit RI 02879	y) 28
	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I	502, F.S., to determine penalty liabilit RI 02879 ress)	20 20 T
	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I (Principal office add	502, F.S., to determine penalty liabilit RI 02879 ress)	2014 SEP
_{7.} 138 MAIN	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I (Principal office add	RI 02879 ress)	2014 SEP 12 SECRETARY
_{7.} 138 MAIN	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I (Principal office add (Current mailing add	RI 02879 ress)	FILED 2014 SEP 12 PM SCURETARY OF
7. 138 MAIN 8. Name and street	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I (Principal office add (Current mailing add et address of Florida registered agent: (P.0	SO2, F.S., to determine penalty liabilite RI 02879 ress) D. Box NOT acceptable)	2014 SEP 12 PM SECRETARY OF
7. 138 MAIN 8. Name and street Name:	(SEE SECTIONS 607.1501 & 607.1 I STREET, WAKEFIELD, I (Principal office add (Current mailing add et address of Florida registered agent: (P.6 GEOFF BOOTHROYD	SO2, F.S., to determine penalty liabilite RI 02879 ress) D. Box NOT acceptable)	2014 SEP 12 SECRETARY

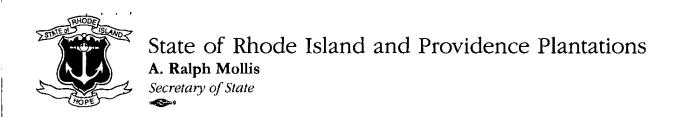
9. Registered agent's acceptance:

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.

(Registered agent's signature)

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: Vice Chairman: Address: John Gilligan Director: Address: Boothroyd Dewhurst, Inc. 138 Main Street, Wakefield, RI 02879 Nicholas Dewhurst Address: Boothroyd Dewhurst, Inc. **B. OFFICERS** President: John Gilligan Address: Boothroyd Dewhurst, Inc. 138 Main Street, Wakefield, RI 02879 Vice President: Address: _____ Secretary: Nicholas Dewhurst Address: Boothroyd Dewhurst, Inc. 138 Main Street, Wakefield, RI 02879 Treasurer: Nicholas Dewhurst Address: Boothroyd Dewhurst, Inc. 138 Main Street, Wakefield, RI 02879 NOTE: If necessary, you may attach ap 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. John Gilligan, President



Certification Number: 14080094730

The office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

Boothroyd Dewhurst, Inc.

a Rhode Island corporation, filed original articles of incorporation in this office on

August 26, 1985

Effective

August 26, 1985

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the State of Rhode Island.

SIGNED AND SEALED ON

Wednesday, September 03, 2014

A. Japa 1. eeio Secretary of State Kalleryn Mc Caerghey

Authorized Agent

