F/40005/95

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

DEC 9 2014 S. GILBERT

COVER LETTER

	Filing Section sion of Corpor					
SUBJECT:	Kortec,	Inc.				
SCEOLE I.		Name of corpora	tion	- must include suffix		· · · · · · · · · · · · · · · · · · ·
Dear Sir or N	1adam:					•
"Certificate of	of Existence,"	by Foreign Corporation or "Certificate of Good Sorporation to transact but	Stand	ding" and check are sub		
Please return	all correspond	lence concerning this ma	atter	to the following:		
Bryan N	/lorris					
_		Name	of P	erson		
Milacro	n LLC					
		Firm/C	Comp	pany		
3010 D	isney Str	eet				
		A	ddre	SS		
Cincinn	ati, Ohio	45209				
		City/Sta	te an	d Zip code		
tax_ope	rations@i	milacron.com				
	J	E-mail address: (to be us	ed fo	or future annual report i	notifi	cation)
For further in	formation con	cerning this matter, plea	se ca	dl:		
Bryan 1	/lorris	_{4.6} 513		, 487-5090		
Nam	e of Person			ode & Daytime Teleph	one l	Number
New Divis Clifto 2661 Talla	Filing Section sion of Corpora on Building Executive Cer hassee, FL 32	ations nter Circle 301		MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orpor	ations
Enclosed is a		following amount: \$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	o	\$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.

	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
_{2.} Massach	nusetts	04-3305017	
	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4 12/15/19	95	Perpetual	
•	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
_{6.} Upon Fill	ing		
·	(Date first transacted business in		
400 Novel	ouryport Turnpike, Rowley,	502, F.S., to determine penalty liability)	
₇ 420 Newi	ourvoor Lurnbike Rowiev.	MAIIIANA	
	(Principal office add	ress)	
	(Principal office additional) Principal office additional (Principal office) (Principal office)	ress) 209	
	(Principal office add	ress) 209	
3010 Disn	(Principal office addition (Principal office add	ress) 209 ress)	• .
3010 Disn	(Principal office addiney Street, Cincinnati, OH 45 (Current mailing addinet address of Florida registered agent: (P.C.)	ress) 209 ress) D. Box NOT acceptable)	411
3010 Disn	(Principal office addition (Principal office add	ress) 209 ress) D. Box NOT acceptable)	102
3010 Disn 8. Name and stre	(Principal office addiney Street, Cincinnati, OH 45 (Current mailing addinet address of Florida registered agent: (P.C.)	ress) 209 ress) D. Box NOT acceptable) any	102
3010 Disconnection 3010 Disconne	(Principal office addition (Principal office add	ress) 209 ress) D. Box NOT acceptable)	

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.

Michele Henry
Assistant VP

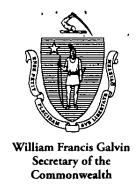
(Registered agent's tignalure)

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: Director: Address: **B. OFFICERS** President: See Attached List Address: Vice President: Secretary: __ Address: ___ Treasurer: Address: __ 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. HUGH D'DONNEL - SECRETARY

Kortec, Inc. Authorization to Transact Business in Florida Name, Title and Business Address of Officers

		OFFICERS
Name	Title	Business Address
Paul Swenson	President	428 Newburyport Turnpike, Rowley, MA 01969
Brian Lavelle	Treasurer	428 Newburyport Turnpike, Rowley, MA 01969
Hugh C. O'Donnell	Secretary	3010 Disney Street, Cincinnati, OH 45209
Tom J. Groeke	Director	3010 Disney Street, Cincinnati, OH 45209
John C. Francy	Director	3010 Disney Street, Cincinnati, OH 45209



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

November 14, 2014

TO WHOM IT MAY CONCERN:

I hereby certify that

CORPEC, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **December 15, 1995.**

I also certify that by Articles of Amendment filed here March 4, 1996, the name of said corporation was changed to

KORTEC, INC.

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.

Secretary of the Commonwealth

William Travino Galecin