

F15000001445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

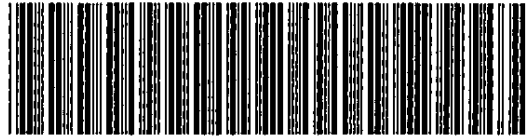
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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McLane, Graf,  
Raulerson & Middleton  
Professional Association

300 TradeCenter, Suite 7000 | Woburn, MA 01801-7419  
Tel: 781.904.2700 | Fax: 781.904.2701 | www.mclane.com

MANCHESTER  
CONCORD  
PORTSMOUTH  
WOBURN, MA

Direct Dial: (781)904-2703  
Email: elizabeth.robinson@mclane.com

March 23, 2015

**VIA CERTIFIED MAIL WITH RETURN**  
**RECEIPT**

Florida Department of State  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: Woodland Partners, Inc.**

To Whom it May Concern:

Enclosed please find an Application by Foreign Corporation for Authorization to Transact Business in Florida on behalf of Woodland Partners, Inc. with a check in the amount of \$70.00 which is the required filing fee.

Please note that the currently registered entity Woodland Partners, LLC is submitting a Withdrawal of Certificate of Authority also at this time (please see copy enclosed).

Kindly acknowledge receipt of this filing by date stamping the enclosed copy of this letter and returning it to my attention. A self-addressed, postage pre-paid return envelope is provided for your convenience.

Should you require further documentation or information, please do not hesitate to call me directly at 781-904-2703. Thank you and kind regards.

Very truly yours,

A handwritten signature in cursive script that reads "Elizabeth Robinson".

Elizabeth Robinson  
Paralegal  
Corporate Department

## COVER LETTER

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

**SUBJECT:** Woodland Partners, 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:

Elizabeth Robinson, Corporate Paralegal

Name of Person

McLane, Graf, Raulerson & Middleton, P.A.

Firm/Company

300 TradeCenter, Suite 7000

Address

Woburn, MA 01801

City/State and Zip code

elizabeth.robinson@mclane.com

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

For further information concerning this matter, please call:

Elizabeth Robinson at ( 781 ) 904-2703

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. Woodland Partners, 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

(State or country under the law of which it is incorporated)

3. 04-3531186

(FEI number, if applicable)

4. 1/1/2015

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

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

7. 24 Walpole Park South, Walpole, MA 02081

(Principal office address)

24 Walpole Park South, Walpole, MA 02081

(Current mailing address)

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

Name: Daniel Maloney

Office Address: 635 Mid Florida Drive, Unit 1

Lakeland

(City)

, Florida 33813

(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.*

 3/16/2015  
(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: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Kenneth D. Chipman

Address: 24 Walpole Park South, Walpole, MA 02081

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Kenneth D. Chipman

Address: 24 Walpole Park South, Walpole, MA 02081

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Kenneth D. Chipman

Address: 24 Walpole Park South, Walpole, MA 02081

Treasurer: Kenneth D. Chipman

Address: 24 Walpole Park South, Walpole, MA 02081

**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. Kenneth D. Chipman, President

(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: March 05, 2015

15 APR - 1 PM 12:11  
RECEIVED  
SECRETARY OF THE STATE  
MAR 11 2015

To Whom It May Concern :

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

**WOODLAND PARTNERS, INC.**

is a domestic corporation organized on **December 29, 2014** , under the General Laws of the 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.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 15032030280

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

Processed by: jmu

*[Handwritten signature]*