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(Address)

(Address)

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16 JUL 13 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CALMETRIX, 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:

MARC ZACHARIAS

Name of Person	15 JUL 13 AM 10:43 FILED TALLAHASSEE, FL 32301
CALMETRIX, INC.	
Firm/Company	
1563 WINTERBERRY LN	
Address	
WESTON FL 33327	
City/State and Zip code	
MZACHARIAS@CALMETRIX.COM	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

MARC ZACHARIAS	617	299-0960
Name of Person	at ()	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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.*

CALMETRIX INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

CALMEX, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. MASSACHUSETTS 3. 27-1987824
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. FEBRUARY 16, 2010 5. _____
(Date of incorporation) (Date of duration, if other than 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. 5 LESTER ST, NEEDHAM HEIGHTS MA 02494
(Principal office address)

(Current mailing address, if different)

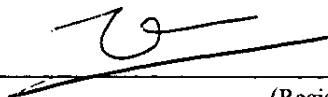
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: MARC ZACHARIAS

Office Address: 1563 WINTERBERRY LN
WESTON, Florida 33327
(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.



(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.

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SECRETARY OF STATE

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

A. DIRECTORS

✓ Chairman: MARC ZACHARIAS
Address: 25 BEACON STREET, ARLINGTON MA 02474

✓ Vice Chairman: SERGEY LIBERMAN
Address: 29 RAFFAELE DR, WALTHAM MA 02452

✓ Director: STAN ELEKTROV, 5 LESTER ST, NEEDHAM MA 02494
Address: _____

Director: _____
Address: _____

B. OFFICERS

✓ President: MARC ZACHARIAS
Address: 25 BEACON ST, ARLINGTON MA 02474

✓ Vice President: PAUL SANDBERG
Address: 44 CROSS STREET, BEVERLY MA 01915

✓ Secretary: MARC ZACHARIAS
Address: 25 BEACON ST, ARLINGTON MA 02474

✓ Treasurer: SERGEY LIBERMAN
Address: 29 RAFFAELE DR, WALTHAM MA 02452

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 11 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. MARC ZACHARIAS, PRESIDENT
(Typed or printed name and capacity of person signing application)

FILED
16 JUL 13 PM 10:43
SECRET
FALLAIA, MARCO A. J. JR.



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

June 10, 2016

TO WHOM IT MAY CONCERN:

I hereby certify that

CALMETRIX INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **February 16, 2010**.

I also certify that so far as appears of record here, said corporation still has legal existence.

FILED
16 JUL 13 AM 10:49
SECRETARY OF THE
TREASURY



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