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| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID

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20/1605

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 278287 7333575

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE: September 1, 2016

ORDER TIME: 9:50 AM

ORDER NO. : 278287-005

CUSTOMER NO: 7333575

FOREIGN FILINGS

NAME: MICHAEL REILLY DESIGN,

INCORPORATED

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

| TO: | _ | tration Se ion of Cor | | | | | | | | |
|--------------|----------------------------------|--|-----------------------------------|-----------------------|--------------|--|-----------------------------|-----------------------------------|-------|-------|
| SHR | ECT: | Michael I | Reilly Design, Inc | orporated | | | | | | |
| БОВ | LCI. | | Name | e of corpora | tion - mus | st include suffix | | | | - |
| Dear S | Sir or M | adam: | | | | | | | | |
| "Certi | ficate o | f Existenc | | te of Good S | Standing" | orization to Transa and check are sub Florida. | | | | |
| Please | return | all corresp | oondence concer | ning this ma | itter to the | e following: | | | | |
| RoxAi | nn D. Ma | ack | | | | | | | | |
| | | | | Name | of Persor | 1 | | | | _ |
| Faegre | Baker I | Daniels LL | P | | | | | | | |
| | | | | Firm/C | Company | | | | | |
| 1470 V | Walnut S | treet, Suite | : 300 | | | | | | | |
| | | | | A | ddress | | | | | _ |
| Bould | er, CO 8 | 0302 | | | | | | | | |
| | | | | City/Sta | te and Zip | code | | 1 | | _ |
| roxanı | ı.mack@ |)faegrebd.c | com | | | | | SEC | 6 | |
| | | | E-mail addre | ss: (to be us | ed for fut | ure annual report | notification) | 基置 | 133 | _ |
| For fu | rther in | formation | concerning this | matter, plea | se call: | | | ASSE O NATO | 9-6 | |
| RoxA | nn D. M | ack | | 303 | , 44 | 7-7750 | | | 2 | |
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| | Regis Divis Clifto 2661 | tration Se ion of Cor on Buildin | porations g : Center Circle | ess: | | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 | | | |
| Enclo | sed is a | check for | the following an | nount: | | | | | | |
| □ \$7 | 0.00 Fil | ing Fee | S78.75 Fil Certificate | ing Fee & e of Status | | .75 Filing Fee & tified Copy | | O Filing ficate of fied Cor | Statu | s & |

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.

| (If name unavail | lable in Florida, enter alternate corporate name ad | onted for the numose of transacting h | pusiness in Florida) |
|---|--|---|----------------------------|
| New York | · | 1-2854744 | |
| | ry under the law of which it is incorporated) | (FEI number, if appli | cable) |
| April 7, 1987 | | | · |
| (Date | 5 | (Date of duration, if other tha | ın perpetual) |
| August 22, 201 | 6 | | |
| • | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 | | |
| 901 Burman Bou | tlevard, Bldg. 701, Calverton, NY 11933-3027 | | |
| · <u>·</u> | (Principal | office address) | SEC SEC |
| | (Current mailing | address, if different) | 26 P |
| . Name and stree | et address of Florida registered agent: (P.O. | Box <u>NOT</u> acceptable) | SSCE, A |
| Name: | Corporation Service Company | | TSTA ® |
| Office Address: | 1201 Hays Street | | |
| | Tallabassee | , Florida 32301 | |
| | (City) | (Zip code) | |
| laving been nam esignated in this urther agree to c | ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rela familiar with and accept the obligations of n Corporation Service | nt as registered agent and agree ative to the proper and complete my position as registered agent. Compa | to act in this capacity. I |

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:

| Chairman | ECTORS David N. Smart | | | |
|-------------------------|---|--|----------------|--------------|
| Address: | 901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027 | | | |
| | | | | |
| Vice Chai | man: | | | |
| Address: | | | | |
| - Director: | | | | |
| | | | | |
| Director: | | | | |
| | | - | | |
| B. OFFI | CERS | | | |
| President: | Michael Reilly | | | |
| | 901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027 | TAL | 5 | |
| - | David N. Smart (Senior Vice President) | AND SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AD | - 435 | = |
| | 901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027 | | <u>5</u> }≝ | |
| _ | | 25 | ф | |
| Secretary: | Joel H. Dorman | 另門 | ၅ | |
| Address: _ | 901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027 | · | | |
| reasurer: | Robert Bradley | | | |
| Address: | 901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027 | | | |
| NOTE: I | f necessary, you may attach an addendum to the application listing additional officers and/o | or director | rs. | |
| re true ar third deg | Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirms that the not that he or she is aware that false information submitted in a document to the Department gree felony as provided for in s.817.155, F.S. | | | |
| 3 | (Typed or printed name and capacity of person signing application) | | | |

11.B. Officers (continued)

Assistant Secretary: William J. DeMeulenaere

901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027

Assistant Treasurer: Mike Van Voorst

901 Burman Boulevard, Bldg. 701, Calverton, NY 11933-3027

16 SEP -6 AM 8: 20 SECRETARY OF STATE

State of New York Department of State } ss

I hereby certify, that the Certificate of Incorporation of MICHAEL REILLY DESIGN, INCORPORATED was filed on 04/07/1987, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 31st day of August two thousand and sixteen.

Anthony Giardina

Executive Deputy Secretary of State

201609010543 * 45

FILED
SECRETARY OF STATE