

1/25/2017

Division of Corporations

F1700000449

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000023209 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

**Resubmission,
please keep original
file date of
01/25/2017**

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
2017 JAN 30 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
BRAIFORM ENTERPRISES INCORPORATED**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

FILED
17 JAN 25 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT

JAN 31 2017

1/1

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Braiform Enterprises Incorporated

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:

Jill Jones

Name of Person

Braiform Enterprises Incorporated

Firm/Company

12B Gerber Road

Address

Asheville, NC 28803

City/State and Zip/Code

jill.jones@braiform.com

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

For further information concerning this matter, please call:

Jill Jones

828

398-3213

Name of Person

Area Code

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

**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. **Braiform Enterprises Incorporated**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"INC.," "CO.," "CORP.," "LTD.," "CO.," or "CORP.")

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

NY

13-1956716

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

(FEI number, if applicable)

January 17, 1962

4. (Date of incorporation)

5. (Date of duration, if other than perpetual)

6. (Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1503, F.S., to determine penalty liability)

12 B Gerber Road, Asheville NC 28803

7. (Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

33324

(City)

, Florida

(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.



Jordan Brown, Assistant Secretary

(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
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Ben Hunt

Address: 12 B Gerber Road, Asheville NC 28803

Vice Chairman: Graeme Rutherford

Address: 12 B Gerber Road, Asheville NC 28803

Director:

Address:

Director:

Address:

B. OFFICERS

President: Graeme Rutherford

Address: 12 B Gerber Road, Asheville NC 28803

Vice President:

Address:

Secretary: Ben Hunt

Address: 12 B Gerber Road, Asheville NC 28803

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors

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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 § 817.155, F.S.

13

Ben Hunt, Secretary

(Typed or printed name and capacity of person signing application)

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17
SECRETARY OF STATE
TREASURY

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BRAIFORM ENTERPRISES INCORPORATED was filed on 07/17/1962, under the name of PLASTI-FORM ENTERPRISE CORPORATION, fixing the duration as perpetual, 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.

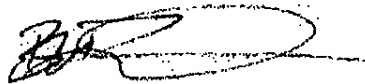
A Certificate of Amendment PLASTI-FORM ENTERPRISE CORPORATION, changing its name to PLASTIFORM ENTERPRISES, INC., was filed 02/04/1977.

A Certificate of Amendment PLASTIFORM ENTERPRISES, INC., changing its name to PLASTI-FORM ENTERPRISES, INC., was filed 06/20/1988.

A Certificate of Amendment PLASTI-FORM ENTERPRISES, INC., changing its name to SPOTLESS ENTERPRISES INCORPORATED, was filed 04/26/1995.

A Certificate of Amendment SPOTLESS ENTERPRISES INCORPORATED, changing its name to BRAIFORM ENTERPRISES INCORPORATED, was filed 11/27/2012.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 24th day of January
two thousand and seventeen.*



Brendan W. Fitzgerald
Executive Deputy Secretary of State



201701250136 • RZ

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SECRETARY OF STATE
TALAMON, LORNA