## 170000 1595

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

Office Use Only



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APR 10 2017 S. YOUNG SECRETARY OF SECRETARION OF ALLIANASSEE, ELORIDADE 17 APR -7 AM 9: 06

2017 APR -7 74 1:53

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	Ι2	0	00	0	00	01	.95
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REFERENCE : 561403 7381425

AUTHORIZATION

COST LIMIT : (\$\7.0.00

ORDER DATE: March 20, 2017

ORDER TIME : :59 PM

ORDER NO. : 561403-001

CUSTOMER NO: 7381425

FOREIGN FILINGS

NAME: MECANEX USA INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

## **COVER LETTER**

TO: New Filing Section Division of Corpora	tione		
Mecaney IIS			
SUBJECT: Mecanex 03	Name of corporati	on - must include suffix	
Dear Sir or Madam:			
The enclosed "Application be "Certificate of Existence," of above referenced foreign co	r "Certificate of Good S	tanding" and check are sub-	
Please return all correspond	ence concerning this mat	ter to the following:	
Michael Gray			
	Name	of Person	
Mecanex USA Inc			
	Firm/C	ompany	
119 White Oak Drive			<b>1</b> 7
Berlin, CT 06037	Ad	dress	notification)
	City/State	e and Zip code	
klinares@mecanexusa.com		•	至
F	-mail address: (to be use	ed for future annual report r	notification) 9
For further information con-	cerning this matter, pleas	se call:	06
Michael Gray 860 828-6531ex 315			
Name of Person	Arc	ea Code & Daytime Teleph	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDR New Filing Section Division of Corpor Division of Corpor Tallahassee, FL 32		ction orporations 7	
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. Mecanex USA (Enter name of co	Inc. proporation; must include "INCORPORATED	," "COMPANY," "CORPORATIO	ON,"
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")		
•	ble in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)
2. Delaware	3	. (FEI number, if	**************************************
	y under the law of which it is incorporated)		applicable)
4			
(Date	of incorporation)	(Duration: Year corp. will cease	to exist or "perpetual")
6			
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liab	pilíty)
<sub>7</sub> 119 White Oak I	Drive,Berlin,CT , 06037, US		=
··	(Principal office ad	dress)	<b>4</b> E
119 White Oak	Drive, Berlin, CT, US, 06037		型品
	(Current mailing ad	dress)	1. 5
8. Name and stree	t address of Florida registered agent: (P	O. Box NOT acceptable)	<b>5</b> <u>4</u>
Name:	Corporation Service Company		7 APR -7 AM 9: 06
Office Address:	1201 Hays Street	<del></del>	စာ
Office Address.	Tallahassee	 32301 , Florida	
	(City)	(Zip code)	
0 m 3	4		
9. Registered age	ent's acceptance: ed as registered agent and to accept ser	vice of process for the above st	ated cornoration at the place
designated in this further agree to c	application, I hereby accept the appoin omply with the provisions of all statutes amiliar with and accept the obligations	tment as registered agent and a relative to the proper and com	ngree to act in this capacity. plete performance of my
Corporation Service Company			Melissa Zender
E	By: 1/1 ====		Asst. Vice President
	(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: \_\_\_\_ELLEN WHITE 119 White Oak Drive, Berlin, CT, 06037 Address: Vice Chairman: Address: \_\_\_\_\_ Director: Address: Director: \_ **B. OFFICERS** President: Vice President: Patricia Saglimbeni 119 White Oak Drive, Berlin, CT, 06037 Secretary: \_ Treasurer: \_\_\_ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Elen white 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. Ellen White

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

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MECANEX USA INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

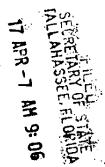
HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SEVENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MECANEX USA INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF AUGUST, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.





Authentication: 202340800

Date: 04-07-17

2939173 8300 SR# 20172340843