

F18000000471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

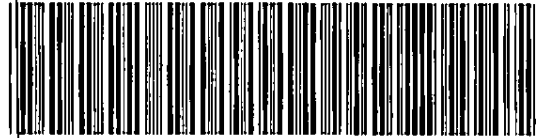
(Document Number)

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

Special Instructions to Filing Officer:

W17-102152

Office Use Only



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12/27/17--01024--019 \*\*78.75

FILED  
18 JAN 29 PM 2:49  
TALLAHASSEE, FLORIDA

JAN 30 2016

BULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 18, 2018

LAURA HANSON  
2085 E FOOTHILL BLVD  
PASADENIA, CA 91107-3296

SUBJECT: M-S CASH DRAWER CORPORATION  
Ref. Number: W17000102152

We have received your document for M-S CASH DRAWER CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 517A00026290

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M-S Cash Drawer Corporation

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:

Laura Hanson

Name of Person

M-S Cash Drawer Corporation

Firm/Company

2085 E. Foothill Blvd.

Address

Pasadena, CA 91107-3296

City/State and Zip code

lhanson@mscashdrawer.com

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

For further information concerning this matter, please call:

Laura Hanson-Acctg. Mgr.

800

544-1749

at ( )

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

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. M-S Cash Drawer Corporation	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")	
M-S CASH DRAWER CORPORATION	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. California	3. 33-0299879
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 04/04/1988	5.
(Date of incorporation)	(Date of duration, if other than perpetual)
6. January 1, 2018	
(Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 1902 N.W. 67TH Place, Gainesville, FL 32653	
(Principal office address)	
2085 E. Foothill Blvd., Pasadena, CA 91107-3296	
(Current mailing address, if different)	
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name:	Laura Hanson - Acctg. Mgr.
Office Address:	1902 N.W. 67TH Place
	Gainesville
(City)	Florida 32653
	(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.

Laura M. Hanson

(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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18 JAN 25 PM 2:49  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Paul Masson

Address: 2085 E. Foothill Blvd, Pasadena, CA 91107-3296

Vice Chairman:

Address:

Director: Lloyd K. Masson

Address: 2085 E. Foothill Blvd, Pasadena, CA 91107-3296

Director: Marie M. Masson

Address: 2085 E. Foothill Blvd, Pasadena, CA 91107-3296

**B. OFFICERS**

President: Paul Masson

Address: 2085 E. Foothill Blvd, Pasadena, CA 91107-3296

Vice President:

Address:

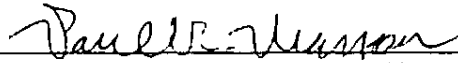
Secretary: Paul Masson

Address: 2085 E. Foothill Blvd., Pasadena, CA 91107

Treasurer:

Address:

**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. Paul Masson - President

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

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18 JAN 20 PM 2:49  
TALLAHASSEE, FLORIDA

**State of California**  
**Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

M-S CASH DRAWER CORPORATION

FILE NUMBER: C1433475  
FORMATION DATE: 04/04/1988  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of December 18, 2017.

ALEX PADILLA  
Secretary of State