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### Florida Department of State

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## FOREIGN PROFIT/NONPROFIT CORPORATION

#### Microdesk, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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J. LEGGETT APR 1 2 2018

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 PLORIDA.

Microdesk, Inc. 1.		,		
(Enter name of co "Inc.," "Co.," "Co	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	Ď," "(	COMPANY," "CORPORATION,"	
Microdesk To	echnologies, Inc.			
(If name unavaila	ble in Florida, enter alternate corporate nam			
o Massachuseus	Value of the latest the second	3. C-	-3238199 (FEI number, if applicable)	
(State or country	under the law of which it is incorporated)	··· —	(FEI number, if applicable)	
7/1/1994				
(Date	of incorporation)	J	(Date of empation, if other than per	petual)
6.				
O	(Date first transacted business (SEE SECTIONS 507.1501 & 607	s in F 7.1502	orida, if prior to registration) , F.S., to determine penalty liability)	
7 10 Tara Blvd STE	E 420, Nashua, NH 03062			
I•	(Prin	cipal	office address)	77
	(Current ma	iling	address, i. different)	
8. Name and stree Name:	et address of Florida registered agent: ( CT Corporation System			: A H 08
1	1200 South Pine Island Road			
Office Address:	Plantation		, Florida	
	(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.

C T Corporation System

## By: Kimberly Laughrey - 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.

11. Names and business addresses of officers and/or direct	ofs:
A. DIRECTORS	
Chairman: Robin Adams, Principal	
20 TO 10 LOWE 120 M. L. SHI 02013	
	1 10° 10° 10° 10° 10° 10° 10° 10° 10° 10
Michael Delacey, Principal	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	j.
	j
Secretary:	<u> </u>
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the	
Signature of L	Director or Officer
The officer or director signing this document (and who is	listed in number 11 above) affirms that the facts stated herein submitted in a document to the Department of State constitutes
13. Robin Adams, Principal	
(Typed or printed name and capa	city of person signing application)



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02138

Date: March 29, 2018

To Whom It May Concern:

I hereby certify that,

#### MICRODESK, INC.

appears by the records of this office to have been incorpe ated under the General Laws of this Commonwealth on July 06, 1994.

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



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

William Tranino Gallein

Certificate Number: 18030618310

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: