FIBOODCHZOH

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COVER LETTER

TO: Registration Division of C					
SUBJECT: GRAM	IMATECH INC				
	Name o	f corporation	- must include suffix		
Dear Sir or Madam:					
	ence," or "Certificate	of Good Stan	Authorization to Transac ding" and check are sub ss in Florida.		
Please return all corr JOE MILLER, ACCO	·	ng this matter	to the following:		
		Name of I	Person		
GRAMMATECH INC					
		Firm/Com	pany		
531 ESTY STREET					
		Addre	ss	· · · · · · · · · · · · · · · · · · ·	
ITHACA, NY 14850				.	
		City/State ar	nd Zip code		
ACCOUNTSPAYABI	.E@GRAMMATECH.	СОМ		ب	
	E-mail address:	(to be used f	or future annual report r	notification)	
For further information	on concerning this m	atter, please c	all:		
JOE MILLER		607 at (273-7340		
Name of Per		Area Code	Daytime Telepl	hone 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 f	or the following amo	unt:			
■ \$70.00 Filing Fee	☐ \$78.75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status &	

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.

I. (Enter name of	corporation; must include "INCORPORATED,"	"COMPANY." "CORPORATION"		
"Inc" "Co.," "(Corp," "Inc," "Co," or "Corp.")	<u> </u>		
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business	s in Florida)	
NEW YORK		3. (FEI number, if applicable)		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
(Date of incorporation) 5.		(Date of duration, if other than perpendicular)	etual)	
),				
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150	lorida, if prior to registration)		
531 ESTY STRE	EET, ITHACA, NY 14850	2. F.S., to determine penany hability)		
· 	(Principal	office address)		
	,,		·n ;	
	(Current mailing	address, if different)		
			:	
. Name and <u>stree</u>	et address of Florida registered agent: (P.O.	Box NOT acceptable)	·	
Name:	DAVE CUTHBERT		<i>:</i> :	
ffice Address:	18 CHATHAM PLACE			
	PALM COAST	32164		
	(City)	(Zip code)		
. Registered age	ent's acceptance:	(Zip code)		

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.

(Registered agent's signature)

10. Attached is a cortificate 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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	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting 16-1338879	business in Florida)
	y under the law of which it is incorporated)	(FEI number, if appl	
(Date of incorporation)		(Date of duration, it other than perpetual)	
	(SEE SECTIONS 607.1501 & 607.15 ET, ITHACA, NY 14850	n Florida, if prior to registration) 502, F.S., to determine penalty liability oal office address)	
Name and stree	(Current mailing) et address of Florida registered agent: (P.C.) DAVE CUTHBERT	ng address, if different) D. Box NOT acceptable)	· · · · · · · · · · · · · · · · · · ·
Name: fice Address:	18 CHATHAM PLACE		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PALM COAST	32164 Florida	
	(City)	(Zip code)	
aving been nam signated in this	ent's acceptance: ed as registered agent and to accept serve application, I hereby accept the appoints omply with the provisions of all statutes is amiliar with and accept the obligations of	nent as registered agent and agre- velative to the proper and complete	e to act in this capacity
ties, and I am f			

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 RAY TEITELBAUM Chairman: 531 ESTY STREET Address: ITHACA, NY 14850 Vice Chairman: Address: __ Director: Address: _ **B. OFFICERS** THOMAS REPS President: 440 SCIENCE DRIVE, SUITES 301-303 Address: MADISON, WI 53711 Vice President: RAY TEITELBAUM Secretary: 531 ESTY STREET, ITHACA, NY 14850 Address: _ THOMAS REPS Treasurer: 440 SCIENCE DRIVE, SUITES 301-303, MADISON, WI 53711 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Pey retillaum 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. RAY TEITELBAUM. CHIEF EXECUTIVE OFFICER

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of GRAMMATECH, INC. was filed on 08/22/1988, 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 11th day of June two
thousand and eighteen.

Brendan W. Fitzgerald
Executive Deputy Secretary of State

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