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COVER LETTER

TO:	Registration Sec Division of Cor							
SUBJ	ECT: Unified O	ffice, Inc.						
		Name	of corporation	ı - must i	nclude suffix			
Dear S	ir or Madam:							
"Certi	nclosed "Applicati ficate of Existence referenced foreign	e," or "Certificat	e of Good Sta	nding`` ar	nd check are sub			••
Please Iris Me	return all corresp	ondence concern	ing this matte	r to the f	ollowing:	į.	130	下二
_			Name of	Person			- \	
Intesei	та Consulting Grou	p, Inc.	Name of	reison		•	A	
151 Sc	outhhall Lane, Suite	450	Firm/Con	npany		(7	្ត បា	
-			Addr	ess				
Maitla	nd, FL 32751							
Peter.\	Vhite@unifiedoffic	c.com	City/State a	ınd Zip c	ode			
		E-mail addres	s: (to be used	for future	e annual report	notification)		
For fu	rther information	concerning this r	natter, please	call:				
Iris M	ennens		407 at (740-3	3011			
	Name of Person	1	Area Coo	le	Daytime Telep	hone Numbe	r	
	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 2 Center Circle	SS:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7		
Enclos	sed is a check for	the following am	ount:					
= \$70	0.00 Filing Fee	☐ \$78.75 Filir Certificate	_		Filing Fee & ed Copy	•	Filing Fedicate of State 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.	Unified Office,								
		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,'	"COMPANY," "CORPORATION	;				
	(If name unavaila	able in Florida, enter alternate corporate nat	ne	adopted for the purpose of transactin	g busine	ss in Flori	da)		
2.		y under the law of which it is incorporated)	3.	(FEI number, if ap			_		
	04/12/2011	•	_	(FEI number, if ap	plicable)				
4.	(Date	(Date of incorporation) 5. (Date of duration, if oth				ier than perpetual)			
Not Applicable 6.									
				n Florida, if prior to registration) 502, F.S., to determine penalty liabili	د ز (۱۷۱	변호: ##:			
7.	20 Trafalgar Squa	are, Nashua, New Hampshire 03063		your to determine pointing machine	.,,	in de la company	7		
		(Prir	ncip	nal office address)	V	<u>.</u>	17		
		(Current ma	iilii	ng address, if different)	-	>-	O		
8.	Name and stree	et address of Florida registered agent: (Р.С	D. Box NOT acceptable)	7>	Ω.			
	Name:	Corporation Service Company							
Office Address:	1201 Hays Street								
		Tallahassee		32301 , 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.

Holly Jones
Assistant 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: Address: Vice Chairman: Address: ________ Raymond Pasquale Director: 20 Trafalgar Square Address: Nashua, New Hampshire 03063 Richard Burns and Daniel Smith Director: 20 Trafalgar Square, Nashua, New Hampshire 03063 Address: **B. OFFICERS** Raymond Pasquale President: 20 Trafalgar Square, Nashua, New Hampshire 03063 Address: Vice President: Address: Address: Peter White, Chief Financial Officer Treasurer: 20 Trafalgar Square, Nashua, New Hampshire 03063 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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

Peter White, Chief Financial Officer & Treasurer

11. Names and business addresses of officers and/or directors: A. DIRECTORS ✓ Daniel Smith Chairman: _ 20 Trafalgar Square Address: Nashua, New Hampshire 03063 Vice Chairman: Address: 'Raymond Pasquale Director: 20 Trafalgar Square Address: Nashua, New Hampshire 03063 Richard Burns and Daniel Smith Director: 20 Trafalgar Square, Nashua, New Hampshire 03063 Address: . OFFICERS Raymond Pasquale esidenti 20 Trafalgar Square, Nashua, New Hampshire 03063 Peter White, Chief Financial Officer 20 Trafalgar Square, Nashua, New Hampshire 03063 1: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer icer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes legree felony as provided for in s.817.155, F.S.

er White, Chief Financial Officer & Treasurer



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

DELAWARE, DO HEREBY CERTIFY "UNIFIED OFFICE, INC." IS DULY

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

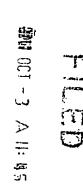
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIFIED OFFICE,

INC." WAS INCORPORATED ON THE TWELFTH DAY OF APRIL, A.D. 2011.





Authentication: 203445990

Date: 09-19-18

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