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Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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2018 OCT 17 AM 9: 17

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M. MILLIGAN OCT 19 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 447883

AUTHORIZATION

COST LIMIT

ORDER DATE: October 17, 2018

ORDER TIME : 1:0 PM

ORDER NO. : 447883-010

CUSTOMER NO: 4305845

#### FOREIGN FILINGS

NAME: ABCOM TECHNOLOGY GROUP INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY \_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

#### **COVER LETTER**

TO:	TO: Registration Section Division of Corporations			
	ABCOM Technology Group Inc.			
SUBJ	ECT: Name of cor	rporation	- must include suffix	
Door 9	Sir or Madam:	•		
Dear 3	on or magain.			
"Certi	nclosed "Application by Foreign Corpora ficate of Existence," or "Certificate of G referenced foreign corporation to transa	iood Stan	ding" and check are sub	
	return all correspondence concerning the M Technology	is matter	to the following:	
	1	Vame of I	Person	
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	F	irm/Com	pany	
		Addre		
		710010		
	Cit	y/State ar	nd Zip code	
	E-mail address: (to	be used f	or future annual report r	notification)
For fu	rther information concerning this matter			·
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			_)	
	Name of Person A	Area Code	Daytime Telep	hone Number
	CTDECT/COUDIED ADDRESS.		MALL INIZ A	NABECC.
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section		
	Division of Corporations		Division of Co	
	Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, F	
	Tallahassee, FL 32301			
Enclo	sed is a check for the following amount:			
☐ \$7 <sup>1</sup>	0.00 Filing Fee		\$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.

(Enter name of co	ology Group Inc. orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATION.	
Delaware	able in Florida, enter alternate corporate name a		
(State or country	y under the law of which it is incorporated)  5.		
	of incorporation) 5.		han perpetual)
323 Newbury Str	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 eet, Boston, MA 02115	02, F.S., to determine penalty hability	y)
7	(Principa	al office address)	F. 22
8. Name and stree	(Current mailing et address of Florida registered agent: (P.O Corporation Service Company	g address, if different)  . Box <u>NOT</u> acceptable)	2018 OCT 17 AH S
Office Address:	1201 Hays Street	<del></del>	
	Tallahassee	32301 , Florida	
	(City)	(Zip code)	
designated in this further agree to co	ent's acceptance:  ed as registered agent and to accept servic  application, I hereby accept the appointm  omply with the provisions of all statutes re  amiliar with and accept the obligations of	ent as registered agent and agre Lative to the proper and complet	e to act in this capacity. I e performance of my
	orporation Service Company y: (Registered a	yent's signature)	Roxanne Turner Asst. Vice President

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 Brent Paris Chairman: 323 Newbury Street, Boston, MA 02115 Address: \_\_ Vice Chairman: B. OFFICERS SEE ATTACHED SCHEDULE A President: Address: \_\_\_\_ SEE ATTACHED SCHEDULE A Vice President: Address: \_\_\_\_\_ SEE ATTACHED SCHEDULE A Secretary: \_ Address: \_\_ Treasurer: 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

Thomas Cooperrider, Vice President and Assistant Secretary

a third degree felony as provided for in s.817.155, F.S.

SCHEDULE A

Names and business addresses of officers

Name	Title	Address
Brent Paris	President and Treasurer	323 Newbury Street Boston, MA 02115
Frank Pados	Vice President	323 Newbury Street Boston, MA 02115
Michael Hompesch	Vice President and Secretary	323 Newbury Street Boston, MA 02115
Thomas Cooperrider	Vice President and Assistant Secretary	323 Newbury Street Boston, MA 02115
John O'Brien	Vice President Finance	323 Newbury Street Boston, MA 02115

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Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ABCOM TECHNOLOGY GROUP 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 SEVENTEENTH DAY OF OCTOBER, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABCOM TECHNOLOGY GROUP INC." WAS INCORPORATED ON THE NINETEENTH DAY OF SEPTEMBER,

A.D. 2018.

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

Authentication: 203627682

Date: 10-17-18

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