

F1800000489Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

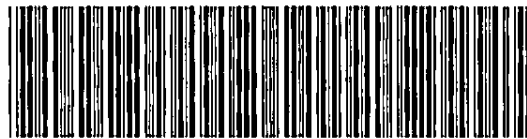
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600319230916

10/16/18--01038--023 **70.00

FILED
2018 OCT 15 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FL
OCT 16 2018

OCT 29 5:17
S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GenIPG, Inc.

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:

Jennifer Robbins

Name of Person

GenIPG, Inc.

Firm/Company

323 Manley Street

Address

West Bridgewater, MA 02379

City/State and Zip code

jrobbins@genisystem.com

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

For further information concerning this matter, please call:

Jennifer Robbins

508

692-4036

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.

GenIPG, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

MA 82-3667869

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

01/01/2018

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

10/01/2018

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

323 Manley Street, West Bridgewater, MA 02379

7. _____
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Thomas Grice

Office Address: 1056 Acappella Drive

Melbourne 32940
_____, 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.

(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.

FILED
2018 OCT 15 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FL

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

A. DIRECTORS

Chairman: Robert Gendron

Address: 323 Manley Street, West Bridgewater, MA 02379

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Robert Gendron

Address: 323 Manley Street, West Bridgewater, MA 02379

Vice President:

Address:

Secretary: Robert Gendron

Address: 323 Manley Street, West Bridgewater, MA 02379

Treasurer: Robert Gendron

Address: 323 Manley Street, West Bridgewater, MA 02379

FILED
2018 OCT 15 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FL

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.

3. Robert Gendron, President

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



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

Date: October 10, 2018

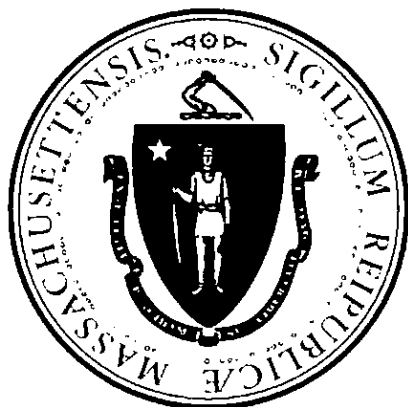
To Whom It May Concern :

I hereby certify that,

GENIPG, INC.

appears by the records of this office to have been incorporated under the General Laws of this
Commonwealth on **January 01, 2018.**

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.

William Francis Galvin

Secretary of the Commonwealth

Certificate Number: 18100219260

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

Processed by: