Division of Corporations Electronic Filing Cover Sheet

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(((H180003495103)))



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To:

Investor of Copporations

#ait Number : (650) 617-6383

5 × 5 16 5

Account Name : INCORE SERVICES INC

Account Number : 12012000007 Phone : (702) 656-2500

1 (702) 888-2689 Fax Number

\*\*Knige (be email address for tale ausiness eatity to se used for future annual report mailings. Enter only one email address plause \*\*

FOREIGN PROFIT/NONPROFIT CORPORATION

Ray Murray Inc.

Certificate of Status	U
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

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From: GFI FaxMaker To: 8506176383 Page: 2/5 Date: 12/10/2016 6:38:32 AM

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#### **COVER LETTER**

T	O: Registration Se Division of Cor					
SI	UBJECT:		Ray	Murray Inc.		
		Name of corpora	tion -	tnust include suffix		
De	ear Sir or Madam:					
(	Certificate of Existence	ion by Foreign Corporation e." or "Certificate of Good g corporation to transact bu	Stand	ing" and check are sub-		
PI	Please return all correspondence concerning this matter to the following:					
	Jennifer Sharp					
<del></del>	The state of the s	Name	of P	ะเรดก		
	InCorp Services, Inc.					
	Firm/Company					
3773 Howard Hughes Pkwy. · Suite 500S						
_	•		ddres			
		Las Vegas, I		<u> </u>		
		· ·		l Zip code		
		documents	-	-	as Gardan)	
		E-mail address: (to be us	sea to	r mittire amiuai teport n	onnesumj	
Fo	or further information	concerning this matter, plus	ise ca	II:		
Jennifer Sh	narp on behalf of InCo	rp Services, Inc.		(800) 246-2677		
	Name of Perso	n Area	Code	Daytime Teleph	none Number	
	STREET/COU Registration So Division of Cor Clifton Buildin 2661 Executive Tallahassee, Fl	rporations g : Center Circle		MAHANG AI Registration Se Division of Co P.O. Box 6327 Tallahassee, F	ection opporations	
Er	nclosed is a check for	the following amount:				
9	\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	0	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

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### 4180003195103

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Ray Murray Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Ine.," "Co.," "Corp," "Ine," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Fiorida) Massachusetts (FEI number, if applicable) (State or country under the law of which it is incorporated) Perpetual 04/25/1973 (Date of incorporation) Upon Filing (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 50 Limestone Road, Lee, MA 01238 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. Name:

#### 9. Registered agent's acceptance:

Office Address:

17888 67th Court North

Loxahatchee

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 us 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.



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.

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## M18000 349 5103

11. Name	es and business addresses of officers and/or directors:			
A. DIRE	CTORS			
Chairman;			- · ··	
Address:				
Vice Chair	man;	<del></del>		
Address: _		,	<b></b>	
•				
Director:	Michael R Hopsicker			
Address:	50 Limestone Road	, <del></del>	<del>-</del>	
	Lee MA 01238			
Director:				
Address:				
B. OFFI	CERS	<u></u> 4.		
President:	Michael R Hopsicker		<u>e</u>	
Address:	50 Limestone Road	2 - <u></u>	묤	
	Lee MA 01238	<u>55</u> -	=	-
Vice Presi	ident:		<del></del>	IT
Address:		A KE	=	,
			70	
Secretary:	Raymond B Murray III		<b></b>	
Address:	14 Hemlock Hill, Gt Barrington, MA 01230	—		
Treasurer	Katherine Amy Consolati			
Address:	472 McNemey Road, Becket, MA 01223			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or direct	ctors.		
	Signature of Director or Officer		********	
The office	are discrete circular this document (and who is listed in number 11 above) affirms that the facts t	stated hore	cin	
are true s	and that he or she is aware that false information submitted in a document to the Department of Stategree felony as provided for in 3.817.155, F.S.	ite constit	utes	
. Kati	herine Amy Consolati, Treasurer			
13	(Typed or printed name and capacity of person signing application)			

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Communwedth

# The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02133

Date: December 06, 2018

To Whom It May Concern:

I hereby certify that according to the records of this office,

RAY MURRAY INC.

SECAL JARRY OF STATE ALLAHASSIT, FLORIDA

is a domestic corporation organized on April 25, 1973

, under the General Laws of the

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



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

Secretary of the Commonwealth

William Francis Gellein

Certificate Number: 18120113380

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

Processed by:

1418 000 3495103