

(Re	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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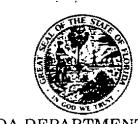
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SECRELARY OF STAIL

N CULLIGANI JAN 2 2019

COVER LETTER

TO:	: Registration Section Division of Corporations						
CHDI	Gibson E	ngineering Compan	y, Inc.				
SUDI	ECT:	Name	of corporation	ı - must i	nclude suffix		
Dear S	Sir or Madam:						
"Сепі	nclosed "Applicat ficate of Existence referenced foreig	e," or "Certificate	of Good Sta	nding" ar	nd check are sub		siness in Florida," d to register the
	return all corresp n M. Tincler	ondence concern	ing this matte	r to the f	following:		
		·	Name of	Person			
Gibson	n Engineering Com	pany, Inc.					
			Firm/Cor	npany			
90 Bro	padway						
			Addr	ess			
Norwo	ood, MA 02062						
			City/State a	ınd Zip c	ode		
ctincle	r@gibsonengineeri	_				· · · · ·	
		E-mail address	s: (to be used	for futur	e annual report	notifi	cation)
For fu	rther information	concerning this n	natter, please	call:			
Collec	n Tincler		781	352-	1240		
	Name of Perso	n	Area Coo) ie	Daytime Telep	hone	Number
	STREET/COL Registration Ser Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle	S:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassec, F	Section Orpora 7	n ations
Enclo	sed is a check for	the following am	ount:				
⊠ \$7	0.00 Filing Fee	S78.75 Filin Certificate			5 Filing Fee & ied Copy		\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2018

COLLEEN M TINCLER 90 BROADWAY NORWOOD, MA 02062

SUBJECT: GIBSON ENGINEERING COMPANY, INC.

Ref. Number: W18000103824

We have received your document for GIBSON ENGINEERING COMPANY, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 618A00024493

Division of Compositions D.O. DOV 6997 Well-house Planta 99914

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.	ring Company, Inc.	···				
•	orporation; must include "INCORPORATED." orp." "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION	ν,"			
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transactir	ng business in Florida)			
Massachusetts 2.	3	04-2308017				
	y under the law of which it is incorporated)	(FEI number, if applicable)				
November 1, 19	962					
(Date	e of incorporation)	(Date of duration, if other than perpetual)				
6.						
U	(Date first transacted business in	n Florida, if prior to registration)				
00 Davidoo Na	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liabil	ity)			
	orwood MA 02062	,				
D.O. D., 571 M	,	pal office address)				
P.O. Box 561, IN	orwood MA 02062					
	(Current maili	ng address, if different)	ZOIS JAN SLORE IN FALL AHA			
0.11		0.0	THE SET			
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	် S 🚉 । 🗂			
Name:	InCorp Services, Inc.		2 F			
Office Address:	17888 67th Court North					
Office Address:	Loxahatchee	33470	PH 3: 1			
		Florida	O			
	(Citv)	(Zip code)				

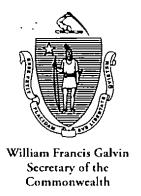
9. Registered agent's acceptance:

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.

Nicole Acosta on behalf of InCorp Services, Inc.
(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.

1. Namo	s and business addresses of officers and/or directors:
A. DIRE	CTORS
hairman:	
Address: _	
_	
/ice Chair	nan:
_	
Director:	
-	
- Director:	
Address	
3. OFFI	CEDS
	Daniel B. O'Brien
	25 Comwell Hill
\ddress: _	Marshfield MA 02050
	CEO - Joseph F. O'Brien
	Sent: CEO - Joseph 1 : O Briefi 85 Grove Street Apt 406
Address:	Wellesley MA 02482
	Daniel B. O'Brien
Secretary:	25 Cornwell Hill, Marshfield MA 02050
Address: .	Colleen M. Tincler
Freasurer:	159 State Street Apt 5, Portsmouth NH 03801
Address:	
NOTE:	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	Signature of Director or Officer
are true a	er 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 gree felony as provided for in s.817.155, F.S.
13. Colle	en M. Tincler, Treasurer, Director of Finance & Systems
	(Typed or printed name and capacity of person signing application)



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

December 11, 2018

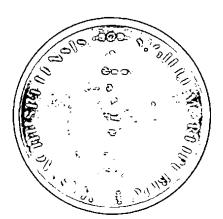
TO WHOM IT MAY CONCERN:

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

GIBSON ENGINEERING COMPANY, INC.

is a domestic corporation organized on **November 1, 1962**, 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 Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Mein Travino Galecin

rocessed By: sam