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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

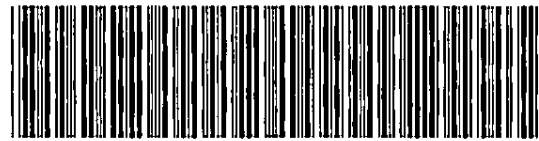
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APPROVED
AND
FILED
2019 JAN 29 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/30/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WM Kavanaugh Furniture CO.
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:

Joseph Nelen
Name of Person
WM Kavanaugh Furniture CO.
Firm/Company
PO Box 5725
Address
Springfield MA 01101
City/State and Zip code
jsnelen@charter.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Nelen at (413) 244-6880
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.

1. WM Kavanagh Furniture CO.
(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)

2. Massachusetts 3. 041495400
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06-19-1928 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. purchased property 6/10/2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 443 State Street, Springfield MA 01105
(Principal office address)

P.O. Box 5725 Springfield MA 01101
(Current mailing address, if different)

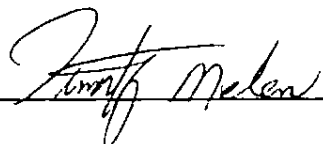
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Timothy Nelen

Office Address: 8396 Nicholls Point
West palm Beach, Florida 033411
(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Timothy Nelen

Address: 8396 Nicholl's Pt
West palm Beach FL 33411

Vice Chairman: Joseph Nelen

Address: 218 West wood Ave
East Longmeadow MA 01028

Director: Kathleen Nelen

Address: 8396 Nicholl's Pt
West palm Beach FL 33411

Director: Holly Nelen

Address: 218 West wood Ave
East Longmeadow MA 01028

B. OFFICERS

President: Timothy Nelen

Address: 8396 Nicholl's Pt
West palm Beach FL 33411

Vice President: Joseph Nelen

Address: 218 West wood Ave
East Longmeadow MA 01028

Secretary: Holly Nelen

Address: 218 West wood Ave East Longmeadow MA 01028

Treasurer: Joseph Nelen

Address: 218 West wood Ave East Longmeadow MA 01028

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Timothy Nelen president
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.

13. Timothy Nelen president
(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED
2019 JAN 28 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



William Francis Galvin
Secretary of the
Commonwealth

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

December 13, 2018

TO WHOM IT MAY CONCERN:

I hereby certify that

WM KAVANAGH FURNITURE CO.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **June 19, 1928**.

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