4/18/2019



Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number :

: (850)617~6383

From:

Account Name : INCORP SERVICES INC

Account Number : T20120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Managareports C. Marp. Com

FOREIGN PROFIT/NONPROFIT CORPORATION Opus Regulatory Inc

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COVER LETTER

,	ECT:		Opus Re	gulatory Inc			
		Name of corpo	ration - u	rust include suffix			
Dear S	ir or Madam:						
above r	eferenced forei	tion by Foreign Corporation ce," or "Certificate of Goor gn corporation to transact t	d Standin pusiness in	g" and check are s n Florida.	osact Busiñess in submitted to regi	Plorida, ister the	.,
Please 1	eturn all corres	pondence concerning this r	matter to 1	the following:		-3·	•
		Patr	ricia Reye	s	, -		
		Nan	ne of Pers	ion		_ *	
		InCorp	Services,	Inc.		ر د :	
		Firm	/Compan	у		_ W	
		3773 Howard Hug	ghes Pkv	vy., Suite 500S			
			Address				
		Las Vegas,	NV 8916	69-6014			
		City/St	ate and Z	ip code			
		managedrep					
		E-mail address: (to be u	ised for fi	iture annual repor	t notification)		
For furtl	er information	concerning this matter, ple	ase call:				
	behalf of InCo Name of Person	rp Services, Inc. at (80 a Area	0) Code	246-2677 Daytime Tele	phone Number		
I (2	STREET/COU Registration Sec Division of Corp Clifton Building 661 Executive Vallahassee, FL	porations Center Circle		MAILING A Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		
3pclosed	is a check for t	he following amount:					
₿ \$70.0	O Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & tified Copy	\$87.50 Fi Certifica Certified	te of Stat	us &

under the law of which it is incorporated.

111000120512 3

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. Opus Regula			
(Linter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Corp," "Loc," "Co," or "Corp.")	,	
	•		
(If name unavai	lable in Florida, enter alternate corporate name adopted for the purpose of transacting busi	ness in Flór	ida)
2. <u>Massachuse</u>			•
(State or count	offs 3. Try under the law of which it is incorporated) (FEI number, if applicable)	le)	
ł. ·	5 Perpetual		
(Det	e of incorporation) (Date of duration, if other than p	espetial)	
01/01/2012			• : •
	(Date first transacted business in Florida, if prior to registration)		 ~
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	23	
245 First Stre	eet, 18th Floor, Cambridge, MA 02142	<u> </u>	
	(Principal office address)	÷.1	
. Name and stree	(Current mailing address, if different)	₩ - 	
. Name and stree		(7)	
Name:	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable)	(7)	
Name:	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17888 67th Court North	(7)	
Name:	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17888 67th Court North	(7)	_
Name: ffice Address:	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17888 67th Court North Loxahatchee , Florida 33470 (City) (Zip code)	(7)	
Name: ffice Address: Registered age aving been nam	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17888 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated carps	oration at	
Name: office Address: Registered age aving been names and this	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, inc. 17888 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated corpus application, I hereby accept the appointment as registered agent and agree to a	oration at	anacit
Name: Office Address: Registered age aving been namesignated in this	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17883 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated corporapplication, I hereby accept the appointment as registered agent and agree to a comply with the provisions of all statutes relative to the proper and complete part	oration at	anacit
Name: Office Address: Registered age laving been nam esignated in this urther agree to co	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, inc. 17888 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated corpus application, I hereby accept the appointment as registered agent and agree to a	oration at	anacit
Name: office Address: Registered age aving been namesignated in this orther agree to co	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17883 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated corporapplication, I hereby accept the appointment as registered agent and agree to a comply with the provisions of all statutes relative to the proper and complete part	oration at	anacit
Name: ffice Address: Registered age aving been nam signated in this rther agree to co	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. 17883 67th Court North Loxahatchee , Florida 33470 (City) (Zip code) ent's acceptance: ed as registered agent and to accept service of process for the above stated corporapplication, I hereby accept the appointment as registered agent and agree to a comply with the provisions of all statutes relative to the proper and complete part	oration at ct in this c formance o	apacity of my

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

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11	١.	N:	ames	bas	business	addresses	of	officers	and/or	directors:
----	----	----	------	-----	----------	-----------	----	----------	--------	------------

A. DIRE	CTORS									
Chairman:	David Sawyer									
Address: 2	245 First Street, 18th Floor									
<u>C</u>	ambridge, MA 02142									
	nan:									
_										
Director: _										
_										
Director:		-	- 131							
			2							
			-5 -							
B. OFFIC				·- ·-						
President:	David Sawyer		<u>-</u> ۲	New W						
Address: 24	5 First Street, 18th Floor		- ដែ							
<u>_C</u>	ambridge MA 02142									
Vice Presiden	t:									
										
Secretary: D	avid Sawyer									
Address: 24	5 First Street, 18th Floor, Cambridge, MA 02142									
	avid Sawyer									
Address: 245	First Street, 18th Floor, Cambridge, MA 02142									
	cessary, you may attach an addendum to the application listing additional officers		. 42							
2.	Officers	and/or	r curecto;	rs.						
te true and d	Signature of Director or Officer director signing this document (and who is listed in number 11 above) affirms the nat he or she is aware that false information submitted in a document to the Depart felony as provided for in s.817.155, F.S.	it the fi	acts state	ed herein constitutes						
3. <u>David Sa</u>	wyer, President									
	(Typed or printed name and capacity of person signing application)			_						

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Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02183

April 11, 2019

TO WHOM IT MAY CONCERN:

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

OPUS REGULATORY INC

is a domestic corporation organized on February 28, 1994, 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.



Processed By: AA

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Francis Galecin