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213 MAY -7 CH 4: 30



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 17, 2019

STEPHEN GALLIGAN 95 PARKER STREET NEWBURYPORT, MA 01950

SUBJECT: INTEGRATED DIGITAL STRATEGIES, INC.

Ref. Number: W19000038035

We have received your document for INTEGRATED DIGITAL STRATEGIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1400.00.

/ The document must contain both the street address of the principal office and the mailing address of the entity.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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.

Brooke N Kinsev Regulatory Specialist II

Letter Number: 719A00007804

COVER LETTER

_	tration Secti on of Corpo				
SUBJECT:	Integrated [Digital Strategies,	Inc.		
		Name o	of corporation	- must include suffix	
Dear Sir or M	adam:				
"Certificate of	Existence,	n by Foreign Co " or "Certificate corporation to to	of Good Star	ding" and check are	nsact Business in Florida," submitted to register the
Please return a	all correspo	ndence concerni	ng this matte	to the following:	
Stephen J. Gall	igan				
			Name of	Person	
Integrated Digi	tal Strategies	s, Inc.			
			Firm/Con	pany	
95 Parker Stree	et		<u>. </u>		<u> </u>
			Addr	ess	
Newburyport, !	MA 01950	<u> </u>			
			City/State a	nd Zip code	
kristine@idigit	alstrategies.c	com	. (to be used	for future annual repo	ort notification)
		E-mail address	: (to be used	or future attitual repo	ne notification)
For further inf	formation co	oncerning this m	atter, please	eall:	
Kristine A Patti at (978) 417-0762					
	of Person		Area Cod	_/	lephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registratio Division of P.O. Box 6	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a d		\$78.75 FilingCertificate of	g Fee &	1 \$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

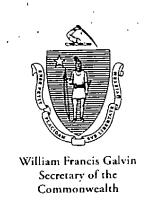
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(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 (State or country under the law of which it is incorporated) (PEI number, if applicable) 4. Massachusetts (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) 95 Parker Street Newburyport, MA 01950 (Current mailing address, if different) Name: Joseph Mohay Home Residence 4072 Waterview Loop Winter Park. (City) Florida 32792 (Zip code)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Massachusetts (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) 95 Parker Street Newburyport, MA 01950 (Current mailing address, if different) Name: Joseph Mohay Home Residence 4072 Waterview Loop Winter Park. Florida 32792 (City) (Zip code)
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(Date of incorporation) (Parker Street Newburse) (Current mailing address, if different) (Current mailing address, if different)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 95 Parker Street Newburyport, M.P. 0160 (Principal office address) 95 Parker Street Newburyport, MA 01950 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Joseph Mohay Home Residence 4072 Waterview Loop Winter Park, (City) (City) (City) (Florida 32792 (Zip code)
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Winter Park, , Florida 32792 (City) (Zip code)
Winter Park, , Florida 32792 (City) (Zip code)
Winter Park, , Florida 32792 (City) (Zip code)
(City) (Zip code)
<u></u>
Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place
lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I
uriner agree to comply with the provisions of all statutes relative to the proper and complete performance of my
luties, and I am familiar with and accept the obligations of my position as registered agent.
luties, and I am familiar with and accept the obligations of my position as registered agent.
luties, and I am familiar with and accept the obligations of my position as registered agent.
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my

under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman:		
Address:		
Vice Chairman:		
Address:		· · · · · · · · · · · · · · · · · · ·
Director:		
Address:		
Director:		
Address:		
73041055.		
B. OFFICERS	-	
President: Stephen J. Galligan, CEO	·-	
Address: 95 Parker Street Newburyport, MA 01950		
Vice President: Joseph Mohay, Chief Revenue Officer		
Address: 4072 Waterview Loop Winter Park, FL 32792		
		
Secretary: Stephen J. Galligan, CEO	7024	-
Address: 95 PARKER Street Newburgpart, MA. 01950	<u> </u>	4
Treasurer: Stephen J. Galligan, CEO		
Address: 95 Parker Street Newburgport, MA 01950	#. 	t
NOTE: If decessary, you may attach an addendum to the application listing additional officers and	l/or directors	3.
Signature of Director or Officer	ne facts state	d herein
The officer or director signing this document (and who is listed in number 11 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Departme a third degree felony as provided for in s.817.155. F.S.	nt of State co	onstitutes
13. Stephen J Galligan, CEO		

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



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

February 26, 2019

TO WHOM IT MAY CONCERN:

I hereby certify that

INTEGRATED DIGITAL STRATEGIES, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on November 14, 2013.

l 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.

Secretary of the Commonwealth

Francis Galein