Division of Corporations

+17188897420

PAGE 1/4

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190002289143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Eax Number : (850) 517-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, IN

Account Number : 075350000353

Phone : (800)221-2972

Fax Number : (718)889-7420

annual report mailings. Enter only one email address please.**

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION BARBIZON LIGHT OF NEW ENGLAND, INC.

**Enter the email address for this business entity to be used for future

0
0
03
\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

Z BROWN

AUG 0 1 2019

7/31/2019

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.

	de in Florida, enter alternate corporate name a	dented for the ourness of transacting bus	iness in Flo	orida)	
(If name unavailat Massachusetts	le in Florida, enter alternate corporate name a				
	under the law of which it is incorporated)	(FEI number, if applical	ole)		
05/23/1979	5.	(Date of duration, if other than	perpetual)		
Upon Filing	•				
Dunne Street W	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150burn, MA 01801	Florida, if prior to registration) 02, F.S., to determine penalty liability)		d. 14	
o Draper Street W		al office address)		ja Ga	:
	(Currem mailin	ng address, if different)	.,		I T
Name and stree	t address of Florida registered agent: (P.	D. Box <u>NOT</u> acceptable)	د این دانش	3-1	ţ-
Name:	BlumbergExcelsior Corporate Services, Inc	 	•	C	
fice Address:	155 Office Plaza Drive, 1st Fl.				
	Tallahassee	32301 , Florida (Zip code)			
	(City)	(Zip code)			
	ent's acceptance: ed as registered agent and to accept serv	ice of process for the above stated co ment as registered agent and agree t relative to the proper and complete p			

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.

Chairman	RECTORS	
Chairman: State Mike Liberman	ion:	
Mike Liberman	5:	100000000000000000000000000000000000000
Mike Liberman Jorapet Street Woburn, MA 01801 PFICERS Thomas Madden Jorapet Street Woburn, MA 01801 Drapet Street Woburn, MA 01801 President: President: Street: Stree		
Mike Liberman 3 Draper Street Woburn, MA 01801 tor: cess: DFFICERS Thomas Madden dent: 3 Draper Street Woburn, MA 01801 President: cess: ce	bairman:	
Mike Liberman 3 Draper Street Woburn, MA 01801 tor: 2555 DFFICERS Thomas Madden 3 Draper Street Woburn, MA 01801 President: 257 258 258 258 258 258 258 258	55:	
3 Draper Street Woburn, MA 01801 OPFICERS Thomas Madden 3 Draper Street Woburn, MA 01801 President: ess: css:		
President: Contact Co	3 Draper Street Woburn, MA 01801	
PFFICERS Thomas Madden 3 Draper Street Woburn, MA 01801 3 President:		
DEFICERS Thomas Madden dent: 3 Draper Street Woburn, MA 0180! President: ess: ess: surer:	ог:	
OFFICERS Thomas Madden dent: 3 Draper Street Wobarn, MA 01801 9 79 President: ess: ess: surer:		
3 Draper Street Woburn, MA 01801	·	
3 Draper Street Woburn, MA 01801 President: ess: ess: surer:		
President: ess: etary: ress: surer:	38'	- TO
etary:		I
etary:	President:	
surer:		
surer:		
surer:	tary:	

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.\$17.155, F.S.

13. Thomas Madden - President

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



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

Date: July 30, 2019

To Whom It May Concern:

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

BARBIZON LIGHT OF NEW ENGLAND, INC.

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

William Travino Gallein

Certificate Number: 19070585760

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

Processed by: