## F2000000017

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W1900095870 code:0047
code:00647

Office Use Only



400335849764

10/23/19--01011--027 \*\*70.00

2020 FEB 17 Pit 12: 27

53/4/20

## **COVER LETTER**

TO: Registration Section Division of Corporat	ions			
RMS MEDIA (				
SUBJECT:	Name of corporation	on - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of Good Sta	anding" and check are su		
Please return all corresponde ANDREW R OLDEN CPA	nce concerning this matte	er to the following:		
	Name of	f Person	·	
ANDREW R OLDEN PC				
	Firm/Co	mpany		
39 MAIN STREET SUITE 301		•		
	Add	ress		
AYER,MA 010432				
· · · · · · · · · · · · · · · · · · ·	City/State	and Zip code		
ANDY@OLDENCPA.COM				
E-1	nail address: (to be used	for future annual report	notification)	
For further information conce	rning this matter, please	call:	hone Number	
ANDREW OLDEN	978 at (	870-9592	870-9592	
Name of Person	Area Coo	le Daytime Telep	hone Number	
STREET/COURIER Registration Section Division of Corporation Clifton Building		MAILING A Registration S Division of Co P.O. Box 632	ection orporations	
2661 Executive Cente Tallahassee, FL 3230		Tallahassee, F		
Enclosed is a check for the fol	lowing amount:			
	78.75 Filing Fee & Certificate of Status	J \$78.75 Filing Fee & Certified Copy	S87.50 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.

	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,	,	
(If name unavai	lable in Florida, enter alternate corporate name SETTS	04-3582574	business in Florida)	
·	try under the law of which it is incorporated)	(FEI number, if app.	licable)	
(Date of incorporation) 5. 09/01/2019			(Date of duration, if other than perpetual)	
	(SEE SECTIONS 607.1501 & 607.1 NE SQUARE, SUITE 904, ANDOVER, MA (	n Florida, if prior to registration) 502, F.S., to determine penalty liability 01810 oal office address)	v)	
	·	ng address, if different)	2020 FEP	
Name and stree	et address of Florida registered agent: (P.C JOAN SHAW	D. Box <u>NOT</u> acceptable)	L1 63.	
ffice Address:	4429 SE BAYSHORE TERRACE		P 25	
	STUART	34997 , Florida	12: 2	

## 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.

A. DIRECTORS RICHARD SEDLER Chairman: 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 Address: **HUGH MALONE** Vice Chairman: 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 Address: PAMELA SEDLER Director 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 Address: Director. Address: B. OFFICERS RICHARD SEDLER President: 300 BRICKSTONE SOUARE, SUITE 904, ANDOVER, MA 01810 Address: \_ HUGH MALONE / Vice President: 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 Address: PAMELA SEDLER Secretary: 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 Address: \_ RICHARD SEDLER Treasurer: 300 BRICKSTONE SQUARE, SUITE 904, ANDOVER, MA 01810 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. PAMELA SEDLER (Typed or printed name and capacity of person signing application)

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



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

January 15, 2020

### TO WHOM IT MAY CONCERN:

I hereby certify that

## RMS & ASSOCIATES, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on November 7, 2001.

I also certify that by Articles of Amendment filed here **April 30, 2002**, the name of said corporation was changed to

## RMS MEDIA GROUP, INC.

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,

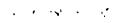
I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galein





October 30, 2019

ANDREW R OLDEN, CPA 39 MAIN STREET SUITE 301 AYER, MA 01432

SUBJECT: RMS MEDIA GROUP INC

Ref. Number: W19000095870

We have received your document for RMS MEDIA GROUP 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):

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) 245-6051.

Sharon D Franklin Regulatory Specialist II

RECEIVED

Letter Number: 819A00022359

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