

F20000002478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

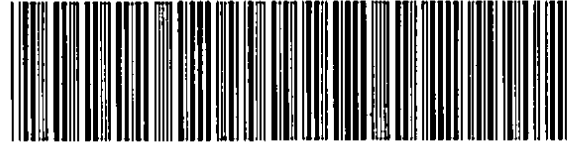
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
INDIANAPOLIS, IN

JUN 4 2020
M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kingfield Corporation

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:

Stacey Nowak, CFO

Name of Person

Kingfield Corporation

Firm/Company

11 Muscovy Drive

Address

Litchfield, NH 03052

City/State and Zip code

stacey.nowak@kingfieldcorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacey Nowak

at (603) 566-9551

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$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. Kingfield Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "In.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 81-1144679
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/22/2015 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 11/4/2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 577 Park Shore Drive, Naples, FL 34103
(Principal office street address)

11 Muscovy Drive, Litchfield, NH 03052
(Current mailing address, if different)

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

Name: Craig Welch

Office Address: 577 Park Shore Drive

Naples, Florida 34103
(City) (Zip code)

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SECRETARY OF STATE

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.

[Handwritten signature]

(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Craig Welch

Vice Chairman Address: 577 Park Shore Drive
Naples, FL 34103

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other _____ Other _____

Chairman Name: John Rodelfeld

Vice Chairman Address: 12 Laurel Path
Port Jefferson, NY 11777

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other Co-Founder _____ Other _____

Chairman Name: Matt Gorin

Vice Chairman Address: 475 Park Avenue South
New York, NY 10016

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other _____ Other _____

Chairman Name: Mark Casady

Vice Chairman Address: One Kendall Square
Cambridge, MA 02139

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary _____ Treasurer _____

Other _____ Other _____

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 STATE OF FLORIDA
 DEPARTMENT OF STATE

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____
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. Craig Welch, President
(Typed or printed name and capacity of person signing application)

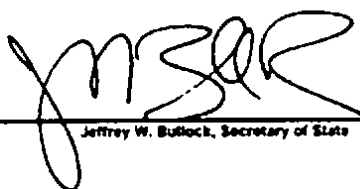
Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KINGFIELD CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MAY, A.D. 2020.




Jeffrey W. Bullock, Secretary of State

5916149 8300

SR# 20203782876

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202965993

Date: 05-20-20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2020

STACEY NOWAK, CFO
KINGFIELD CORPORATION
11 MUSCOVY DRIVE
LITCHFIELD, NH 03052

SUBJECT: KINGFIELD CORPORATION
Ref. Number: W20000045320

We have received your document for KINGFIELD CORPORATION and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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 \$300.00.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 120A00009377

RECEIVED

JUN 2 2020