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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
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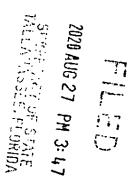
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2020

KRISTEN FRENCH 64 JACKSON ROAD DEVENS, MA 01434

SUBJECT: QUIET LOGISTICS, INC.

Ref. Number: W20000085967

We have received your document for QUIET LOGISTICS, INC. and your check(s) totaling \$87.50. 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.

Yvette Scott Document Specialist II

Letter Number: 720A00014797

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Quet Log 15thc. Name of corporation	s, Inc	
Name of corporation	- must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact business.	ding" and check are subn	Business in Harida.
Please return all correspondence concerning this matter	to the following:	27 P
Kristen trench		
Kristen French Name of Quiet Logistics, 11  64 Jackson Road Addre	Person	PH 3: 1:7
Firm/Com	pany	
64 Jackson Road		
Addre	:88	
Devens, MA OI	474	
City/State ar	nd Zip code	•
Devens, MA Or City/State at Kfrenchequre + loc E-mail address: (to be used f	91511CS.Co	motification)
For further information concerning this matter, please c		
Kristen French at COC? Name of Person Area Code	9 401 - 551	2-
Nume of Crossif Area Cock	Dayune rerepii	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassec, FL	ction porations
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTMENT  \$70.00 Filing Fee \$\Bigcirc\$ \$78.75 Filing Fee & \$\Bigcirc\$  Certificate of Status	OF STATE   \$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

(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc." "Co," or "Corp.")	, ' "COMPANY," "CORPORATIO	N,''
(If name unavails	able in Florida, enter alternate corporate name	• •	_
Dela	ware 3.	20.209367	2
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
	<i>2009</i> 5.	(Date of duration, if other	<del></del>
(Date	of incorporation) 8/11/2020	(Date of duration, if other	than perpetual)
		Florida, if prior to registration)	lity)
64 10	CKSON. Road S	Painens MA	OIU3EL
Cal Ca		cc street address)	
	(Current mailin	g address, if dirferent)	
Name and stree	<u>st address</u> of Florida registered agent: (P.C	). Box <u>NOT</u> acceptable)	PH 3:
Name:	Corporation Service Company		<b>17</b>
fice Address:	1201 Hays Street		
	Taliahassee	 , Florida <sup>32301</sup>	
	(City)	(Zip code)	
wing been nam signated in this ther agree to c	ent's acceptance:  ed as registered agent and to accept servion  application, I hereby accept the appoint  omply with the provisions of all statutes re  with and accept the obligations of my pos	ient as registered ayent and agr clative to the proper and comple	ee to act in this supacity.
C	orporation Service Company		
	y: Andra Arskis (Registered agent's si	/	

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.

AUG 2 7 2021

A. DIRECTORS'	
OChairman Name: Brian Lewerise	DChairman Name: 1011 MCDMOU
DVice Chairman Address: 300 Ball Street	□Vice Chairman Address: 42 PXC +116Vey 11/2
Director Northborough ma	□ Director <u>Walpale 711 a</u> □ President 02051-1126
President 01532-1068	□President 02051-1126
□Vice President	□Vice President
□ Secretary □ Treasurer	☐Sceretary ☐Treasurer
Other Other	Mother CFC Other
Dehairman Name: Eugene Goras	□Chairman Name:
Delairman Name: Eugene Goras  Divice Chairman Address: 2 Post Road W	□Chairman Name: □ □Vice Chairman Address: □ □Director
Director WESH pert, CT	□ Director
□President	□President =
□Vice President	□ Vice President
□ Secretary □ Treasurer	□Secretary □Treasurer
□Other	Other Other
□Chairman Name:	□Chairman Name:
□Vice Chairman Address:	□Vice Chairman Address:
□ Director	□ Director
□President	□President
□Vice President	□ Vice President
☐ Secretary ☐ Treasurer	□Secretary □Treasurer
Other	□Other
Important Notice: Use an attachment to report more than six (6). The attachment to report more than six (6) individuals may be added to the index when filling your Florida Department to report more than six (6).	ent of State Annual Report form.

Signature of Director or Officer

The officer or director signing this document (and who is fisted 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. Brian Lemerise. President, COO

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "QUIET LOGISTICS, INC." 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 NINETEENTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BLEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE:
BEEN PAID TO DATE.

orp. delaware. gov/auth

Authentication: 203501271

Date: 08-19-20