# F2000003955

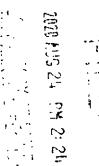
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
,			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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9/14/20



### COVER LETTER

Division of C					
SUBJECT: BOC In	nternational. Inc.				
	Name of corpora	ition - must include suffix			
Dear Sir or Madam:					
"Certificate of Exister	ation by Foreign Corporation nee," or "Certificate of Good S ign corporation to transact bu	Standing" and check are sub			
Please return all corre	spondence concerning this ma	atter to the following:	26.2		
Manny Paul					
	Name	e of Person	- <u> </u>		
BOC International, Inc.					
	Firm/0	Company	1 1 1 1		
21 Drydock Ave, Suite		, ,			
	A	.ddress	<u> </u>		
Boston, MA 02210					
	City/Sta	nte and Zip code	<del></del>		
manny.paul@bocintl.co	om.	•			
	E-mail address: (to be us	sed for future annual report r	notification)		
For further information	on concerning this matter, plea	ase call:			
Manny Paul	at (	412-4745			
Name of Per		Code Daytime Telep	hone Number		
Registration S Division of C The Centre of	orporations l'Tallahassee roe Street, Suite 810	Registration S Division of C P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	or the following amount:  able to: FLORIDA DEPARTMI  \$78.75 Filing Fee & Certificate of Status	ENT 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

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.	BOC International, Inc.						
	(Enter name of co	" "COMPANY," "CORPORATION.					
	BOC Internation	al INCORPORATED					
	(If name unavaila	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting	business	in Flo	rida)	
7	Massachusetts	3	04-3194617				
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)				
4.	06/15/1993	5	N/A				
''	(Date of incorporation) (Date of duration, if			an perpe	tual)		
6.	N/A						
			n Florida, if prior to registration) 502, F.S., to determine penalty liability	;)	2828 YUS		
7.	21 Drydock Ave.	Ste 520W, Boston, MA 02210			2	;	
	(Principal office street address)			٠.	Ę.	,	
	Same as above				<u>. p</u>	•	
		(Current maili	ng address, if different)		<i>i</i> 5		
					12		
8.	Name and stree	t address of Florida registered agent: (P.C	D. Box NOT acceptable)		·		
	Name:	Richard Correnti	· <del></del>				
Office Address: 8096 Grande Shores Dr		8096 Grande Shores Dr					
		Sarasota	, Florida 34240				
		(City)	(Zip code)				

#### 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	•						
□Chairman	Patrick Fay Name:	□Chairman	Brian Kilduff Name:				
□Vice Chairman	Address: 21 Drydock Ave, Ste 520W	□Vice Chairman	Address: 21 Drydock Ave, Ste 520W				
□Director	Boston, MA 02210	□Director	Boston, MA 02210				
■ President		■ President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	□Treasurer				
□Other	□(7ther	□Other					
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□Sceretary	□Treasurer				
□Other	Other	□Other					
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President	411113	□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□Sceretary	□Treasurer				
□Other	□()ther	□Other	□Other				
Important Notice: Use an attachment to report more than six (6). The attachment pill be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filling your Florida Department of State Annual Report form.  12.  Signature of Director of officer  The officer or director despite this document (and who is listed in number 11 above) affirms and the fact rate and that he or							
A color and reduction by the communities of a color end of the pertinent of the color of the color end of the state of the color of the							
President 13.							



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

Date: August 10, 2020

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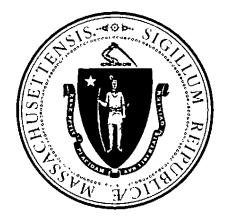
To Whom It May Concern:

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

**BOC INTERNATIONAL, INC.** 

is a domestic corporation organized on June 15, 1993 . under the General Laws of the

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

illian Travin Galein

Certificate Number: 20080193810

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

Processed by: Bod