

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Reynolds Hay and Straw, Inc

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

528
3/8/21

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDAIN COMPLIANCE WITH SECTION 607 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

Reynolds Hay and Straw, Inc.

(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. New Jersey

(State or country under the law of which it is incorporated)

3

22-2995110

(FEI number, if applicable)

4 September 1, 1989

(Date of incorporation)

5

(Date of duration, if other than perpetual)

6

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607 1501 & 607 1502, F.S., to determine penalty liability)

7 350 SE 2nd Street, Unit 3050, Fort Lauderdale, FL 33301

(Principal office street address)

(Current mailing address, if different)

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

Name Dorothy Reynolds

Office Address 350 SE 2nd Street, Unit 3050

Fort Lauderdale

(City)

Florida 33301

(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

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

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A. DIRECTORS

☐ Chairman Name Dorothy Reynolds
☐ Vice Chairman Address 350 SE 2nd Street, Unit 3050
Fort Lauderdale, FL 33301
☒ Director
☒ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name Kevin Reynolds
☐ Vice Chairman Address 350 SE 2nd Street, Unit 3050
Fort Lauderdale, FL 33301
☒ 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

☐ 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

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

Dorothy Reynolds, President

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

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**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

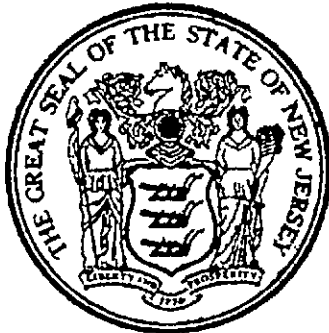
REYNOLDS HAY AND STRAW, INC.
0100426293

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on September 01, 1989.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

DOROTHY REYNOLDS
2097 BURLINGTON-COLUMBUS ROAD
BORDENTOWN, NJ 08505-0000



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
4th day of March, 2021*

Elizabeth Maher Muoio
State Treasurer

Certificate Number 6116339299

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/ISP/Verify_Cert.jsp

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