F220005008

(Req	uestor's Name)	
(Add	iress)	
DbA)	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL.
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



900392594209

03.13/23-+3113---611 ••£ .80



T. LEMIEUX SEP - 7 2022

COVER LETTER

	stration Section				
SUBJECT:	wit bit				
SOBJECT		Name of corpora	ition - m	ust include suffix	
Dear Sir or N	ładam:				
"Certificate of	of Existence," o	by Foreign Corporation r "Certificate of Good rporation to transact bu	Standing	g" and check are sub-	et Business in Florida." mitted to register the
Please return	all correspond	ence concerning this m	atter to 1	he following:	
Tracy H Tirel	li				
		Nam	e of Pers	son	
Wales-Darby.	Inc				
		Firm ^a	Compan	y	
2910 Express	Drive South,				
		در	ddress		
Islandia NY I	1749				
		City/St	ate and 2	ip code	
ttirelli@wales					
	Ī	-mail address: (to be u	sed for f	uture annual report n	otification)
For further in	nformation con-	cerning this matter, ple	ase call:		
Tracy H Tirel	li	at ()	495-3242 Daytime Teleph	
Nan	ne of Person	Area	Code	Daytime Teleph	none Number
Regi Divi: The 2415	EET/COURIE stration Section sion of Corpora Centre of Talla 5 N. Monroe Stu thassee, FL 32	itions hassee reet, Suite 810		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a Please make c \$70.00 Fi	heck payable to:	following amount: FLORIDA DEPARTM S78,75 Filing Fee & Certificate of Status	□ \$7	STATE 98.75 Filing Fee & ertified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



August 18, 2022

TRACY H TIRELLI 2910 EXPRESS DR S ISLANDIA, NY 11749

SUBJECT: WALES-DARBY, INC. Ref. Number: W22000106553

We have received your document for WALES-DARBY, 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.

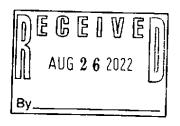
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 722A00018453

RECEIVED SEP 0 6 2022



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.

,	orporation; must include "INCORPORATED," "	COMPANY," "CORPORATION	ON,"
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp,")		
	ble in Florida, enter alternate corporate name add	and Constanting of Francisco	ing business in Election
New York State	$\frac{1}{2}$ under the law of which it is incorporated)	(22.2.2.7.1	1' 4; .
9/1976	of incorporation) 5.		
(Date	of incorporation)	(Date of duration, if other	r (nan perpetuar)
	(Date first transacted business in F	Table 16 major to consistentions	
	(SEE SECTIONS 607.1501 & 607.1501	2, F.S., to determine penalty liab	ility)
2910 Express Driv	ve South		
	(Principal office	street address)	
Islandia, NY 117-	49		
	(Current mailing	address, if different)	
		Boy NOT acceptable)	
Name and stree	t address of Florida registered agent. (P.O.)	In Italian	
	et address of Florida registered agent: (P.O.) Tracy H Tirelli	in i	
Name and stree	Tracy H Tirelli		
Name:	Tracy H Tirelli 124 Signature Drive		
Name:	Tracy H Tirelli 124 Signature Drive		
Name:	Tracy H Tirelli 124 Signature Drive		283
Name:	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City)	Florida 32951	2022 S
Name: ffice Address: Registered age	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City)	, Florida 32951(Zip code)	83
Name: ffice Address: Registered age aving been names in this	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application. I hereby accept the appointme		ted corporation diffic gree to act in this cap
Name: fice Address: Registered age aving been names ignated in this rther agree to contact the contact that the contact the	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes relo		ted corporation diffice gree to act in this cap- lete performance of n
Name: ffice Address: Registered age aving been names ignated in this arther agree to contact the contact that are the contact that ar	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service		ted corporation at the gree to act in this cap- lete performance of n
Name: ffice Address: Registered age aving been names ignated in this arther agree to contact the contact that agree to contact the contact that the contact the contact the contact the contact that the contact	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes relo		ted corporation at the gree to act in this cap- lete performance of n
Name: ffice Address: Registered age aving been names ignated in this arther agree to contact the contact that agree to contact the contact that the contact the contact the contact the contact that the contact	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes relatives with and accept the obligations of my positives.	. Florida 32951 (Zip code) of process for the above stantas registered agent and agative to the proper and comption as registered agent.	ted corporation at the gree to act in this cap- lete performance of n
Name: ffice Address: Registered age aving been names ignated in this arther agree to contact the contact that agree to contact the contact that the contact the contact the contact the contact that the contact	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes relatives with and accept the obligations of my positives.	. Florida 32951 (Zip code) of process for the above stantas registered agent and agative to the proper and comption as registered agent.	ted corporation diffice gree to act in this cap- lete performance of n
Name: ffice Address: Registered age aving been namesignated in this arther agree to contact the contact that agree to contact the contact that the contact the contact that the contact the contact the contact the contact that the contact the contact the contact that the contact the contact that the contact that the contact the contact that the	Tracy H Tirelli 124 Signature Drive Melbourne Beach (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes relo	. Florida 32951 (Zip code) of process for the above stantas registered agent and agative to the proper and comption as registered agent.	ted corporation at the gree to act in this cap- lete performance of n

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS Name: Brian P Darby Ryan Darby □Chairman Chairman 2910 Express Drive South 2910 Express Drive South ☐Vice Chairman Address: ☐ Vice Chairman Islandia, NY 11749 Islandia, NY 11749 □ Director **■** Director President □ President ☐ Vice President ☐ Vice President Treasurer □ Secretary ☐ Secretary Treasurer □Other _____ □Other _____ □ Other _____ Other _____ James Silvestri Name: Name: ____ Chairman □Chairman 2910 Express Drive South 2910 Express Drive South □Vice Chairman Address: ☐ Vice Chairman Address: Islandia NY 11749 Islandia NY 11749 Director □Director C President □President □Vice President ☐ Vice President □ Secretary Treasurer ☐ Secretary ☐Treasurer ■Other CFO Other _____ Other _____ □Other _____ Name: _____ □ Chairman □ Chairman Name: ______ □Vice Chairman Address: _____ ☐ Vice Chairman Address: Director Director □President ☐ President ☐ Vice President _ ☐ Vice President Treasurer □ Secretary ☐ Secretary ☐Treasurer □Other _____ 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. 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. (Typed or printed name and capacity of person signing application)

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: WALES-DARBY INC.

DOS ID Number: 351242

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 09/03/1974

Statement Status: CURRENT Statement Due Date: 09/30/2022

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on July 28, 2022 at 09:58 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Hughan

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100001938971 To Verify the authenticity of this document you may access the