# F23000001329

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PICK-UP WAIT MAIL					
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S. ROBERTS
MAR - 8 2023

### **COVER LETTER**

TO: Registration Division o	n Section f Corporations			
SUBJECT: Fact	ory Five Racing, Inc.			
50B5EC1	Name of corpora	tion - must include suffix		
Dear Sir or Madam	ı:			
"Certificate of Exis	lication by Foreign Corporation stence," or "Certificate of Good Soreign corporation to transact bus	Standing" and check are sub-	t Business in Florida," nitted to register the	
Please return all co	rrespondence concerning this ma	itter to the following:		
David T. Smith				
	Name	of Person		
Factory FiveRacing,	lne.			
	Firm/C	Company		
9 Tow Road				
100,00	A	ddress		
Wareham, MA 0257	1			
	City/Stat	te and Zip code		
dave@Factoryfive.co				
	E-mail address: (to be use	ed for future annual report ne	otification)	
For further informa	tion concerning this matter, pleas	se call:		
Dave Smith	Name of Person at (508 Area Code Daytime Telephone Number			
Name of P	erson Area C	Code Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	for the following amount: syable to: F1.OR1DA DEPARTME e	NT 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. F	actory Five Rad	cing, Inc.	on Thomas,			
(E "lı	nter name of conc.," "Co.," "Co.	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"			
F	actory Five Rac	cing or Factory Five				
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus						
2. State of Massachusetts, USA		nusetts, USA	043310335			
(State or country under the law of which it is incorporated) 4. Jan 25, 1995			(FEI number, if applicable)			
6, W	(Date of incorporation) (Date of duration, if other than perpetual)					
7. Fac		18.9 Tow Road Wareham, MA O	n Florida, if prior to registration) 502, F.S., to determine penalty liability) 257/ ice street address)			
		(Current mailir	ng address, if different)			
8. Na	une and street	address of Florida registered agent: (P.C	D. Box NOT acceptable)			
	Name:	STREET LEGAL LLC				
Office	Address:	5100 NE 12TH AVE UNIT A OAKLAND PARK				
		(City)	, Florida 33334 (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	Name:	□ Chairman	Name: Sandra DeBurgo			
□Vice Chairman	Address: 241 Rumstick Road	□Vice Chairman	9 Tow Road Address:			
□Director	Barrington, RI 02806	□Director	Wareham, MA 02571			
President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	Secretary	□Treasurer			
□Other	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	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	□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.

David T. Smith, President and CEO



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

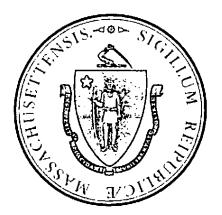
Date: January 31, 2023

To Whom It May Concern:

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

#### FACTORY FIVE RACING, INC.

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

William Travers Gallein

Certificate Number: 23010606610

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

Processed by: Bod