

F9900002861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

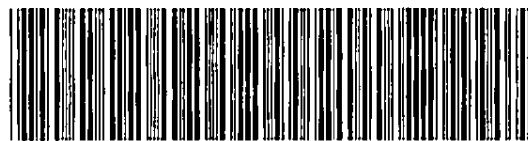
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500363238765

04/07/21--01024--012 **43.75

6.1
-711.2:62

R. W. F. T.

JUN 1 2021

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: HALEY & ALDRICH, INC.

Name of Corporation

DOCUMENT NUMBER: F9900002861

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAREN HEALEY

Name of Contact Person

HALEY & ALDRICH, INC.

Firm/Company

70 BLANCHARD ROAD, SUITE 204

Address

BURLINGTON, MA 01803

City/State and Zip Code

LEGALREGISTRATION@HALEYALDRICH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN HEALEY

603

391

3334

at ()

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F9900002861

(Document number of corporation (if known))

1. HALEY & ALDRICH, INC.

(Name of corporation as it appears on the records of the Department of State)

2. MASSACHUSETTS

(Incorporated under laws of)

3. 06/03/1999

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

DELAWARE

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent N/A

(Florida street address)

New Registered Office Address: _____ Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If the amendment changes person, title or capacity in accordance with 67-1504(4) indicate that change

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	N/A	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10 Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated

Patricia E. McKee

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

PATRICIA E. MCKEE

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

FILING FEE \$35.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HALEY & ALDRICH, 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 SEVENTEENTH DAY OF MARCH, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HALEY & ALDRICH, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JANUARY, A.D. 2020.

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



4080440 8300

SR# 20210940354

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202760367

Date: 03-17-21

STATE OF DELAWARE



DELAWARE ASSOCIATION OF PROFESSIONAL ENGINEERS
92 Read's Way, Suite 208, New Castle, DE 19720

PHONE: 302-323-4588
E-mail: office@dape.org

CERTIFICATE OF AUTHORIZATION

ISSUED BY THE AUTHORITY OF
THE COUNCIL OF THE DELAWARE ASSOCIATION OF PROFESSIONAL ENGINEERS
TO

HALEY & ALDRICH, INC.
70 Blanchard Road, Ste. 204
Burlington, MA 01803

THIS CERTIFICATE AUTHORIZES THE AFORESAID CORPORATION OR PARTNERSHIP TO
PRACTICE OR OFFER TO PRACTICE PROFESSIONAL ENGINEERING IN THE STATE OF
DELAWARE AS PROVIDED IN THE DELAWARE LAW, TITLE 24, CHAPTER 28, SECTION 2821.

FOR THE PERIOD: 10/1/2020 to 09/30/2021

CERTIFICATE NUMBER: 2939

ANNUAL RENEWAL FEE: \$150.00

APPROVED

BY:

A handwritten signature in black ink, appearing to read "J. Jakubowski III".

Joseph Jakubowski III, P.E., President

