

M6000008479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

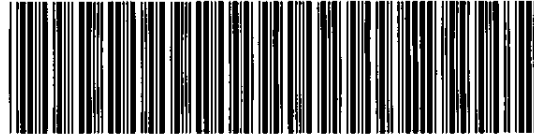
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

6510 2004  
1810<sup>00</sup> W16-72025

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 OCT 21 AM 8:02

OCT 26 2016  
S. YOUNG

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 OCT 21 PM 3:53



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 24, 2016

CT CORP C

SUBJECT: XYLEM ANALYTICS LLC  
Ref. Number: W16000072025

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TALLAHASSEE, FLORIDA  
16 OCT 21 AM 8:02

We have received your document for XYLEM ANALYTICS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total ~~\$1810.00~~!

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 616A00022717

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16 OCT 25 PM 3:21  
SUFFICIENCY OF FILING

# CT CORP C/O SUNSHINE CORPORATE

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

850-508-1891 (cell)

Date: 10/25/16

ACCT. 120160000072

*Ima Boy*

Name:	Xylem Analytics
Document #:	W16000072025
Order #:	

Certified Copy of Arts & Amend:	Correction		
Plain Copy:			
Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination:	
		Number of Certs:	

Filing:	Certified:
	Plain:
	COGS:

Availability	_____
Document	_____
Examiner	_____
Updater	_____
Verifier	_____
W.P. Verifier	_____
Ref#	_____

Amount: \$ 1810.00

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TALLAHASSEE, FLORIDA  
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Thank you!

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Xylem Analytics, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Sonia Hollies

Name of Person

Xylem, Inc.

Firm/Company

1 International Drive

Address

Rye Brook, NY 10573

City/State and Zip Code

sonia.hollies@xyleminc.com

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

For further information concerning this matter, please call:

Sonia Hollies

914

3235732

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

16 OCT 21 AM 8:02

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Xylem Analytics, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited  
Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. 74-3052193

(FEI number, if applicable)

4. 02/17/2004

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 100 Cummings Center 535N

Beverly Massachusetts 01915

(Street Address of Principal Office)

6. 1 International Drive

Rye Brook, NY 10573

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C.T. Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above-stated limited liability company 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.

By: C.T. Corporation System

(Registered agent's signature)

James D. Martin  
Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Sonia Hollies

Assistant Treasurer & Assistant Secretary

1 International Drive Rye Brook, NY 10573

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the  
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath  
of the translator must be submitted)

Sonia A. Hollies

(Signature of an authorized person)

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. I am aware that any 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.

Sonia Hollies

Typed or printed name of signee

FILED  
STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "XYLEM ANALYTICS LLC" IS DULY FORMED  
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND  
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS  
OF THE TWENTIETH DAY OF OCTOBER, A.D. 2016.

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 OCT 21 AM 8:02



3543978 8300

SR# 20166295120

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 203197185

Date: 10-20-16