M17000002027

| (Requestor's Name) |
|---|
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| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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M17-2027

DEPARTHER OF STATE

DIVISION OF CORPURATE 43

N. CAUSSEAUX MAR 1 0 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 539917 4300358

AUTHORIZATION :

COST LIMIT

ORDER DATE: March 7, 2017

ORDER TIME : 10:03 AM

ORDER NO. : 539917-030

CUSTOMER NO: 4300358

FOREIGN FILINGS

NAME: RECOMBINE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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

IN COMPILANCE WITH SECTION (05.00)2 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Recombine, LLC | The same of the state of the same of the s | |
|---|--|------------------------------|
| (Name of For | eign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or | "LLC."J |
| | | |
| Liability Company," "L.L.C, | dternate name adopted for the purpose of transacting business in Florida. The alternate nam," or "LLC.") | ne must include "Limited |
| 2. Delaware | 3. | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability (FEI number, if applicable) | |
| 4 | (Date first transacted business in Florida, if prior to registration) | - |
| | (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | |
| 5. 75 Corporate Drive | | - |
| Trumbull, CT 06611 | | _ |
| | (Street Address of Principal Office) | |
| 6. 75 Corporate Drive | | 17 1 |
| Trumbull, CT 06611 | | 7 355 |
| | (Mailing Address) | AR TO |
| 7. Name and street addres | ss of Florida registered agent: (P.O. Box NOT acceptable) | 9-6-6- |
| Name: | | 9 AH 10: 43 |
| | 1201 Hays Street. | AM IO: 43 |
| Office Address: | - 11 1 U STEET | F 9 |
| | Tallahassee , Florida 3230) (City) (Zip code) | · ω 🚓 |
| Banistanal ananthusana | | |
| Registered agent's accep Having been named as re | nance: gistered agent and to accept service of process for the above stated limited liabi. | lity company at the place |
| designated in this applica. | tion, I hereby accept the appointment as registered agent and agree to act in thi | s capacity. I further agree |
| | ons of all statutes relative to the proper and complete performance of my duties, my position as registered agent. | , and I am familiar with and |
| accept the tungularis of t | My position as registered agent | |
| | (Registered agent's signature) Melissa | 7 ender |
| | | |
| 8. The name, title or capa | Asst. Vice I | ricsidelli |
| Paul Remmell, Manager | 75 Corporate Drive, Trumbull, CT 06611 | |
| Carol R. Kaufman, Manag | ger 75 Corporate Drive, Trumbull, CT 06611 | |
| Albert G. White, III, Man | ager 75 Corporate Drive, Trumbull, CT 06611 | |
| | of existence, no more than 90 days old, duly authenticated by the official baying o | |
| unsdiction under the law of of the translator must be sa | of which it is organized. (If the certificate is in a foreign language, a translation of | the certificate under oath |
| or the translator fitter be se | dolimited) | |
| | | |
| | Signature of an authorized person | |
| | I in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any or the Department of State constitutes a third degree felony as provided for in s.817. | |
| | Cynthia M. Wallace, Authorized Person | |
| | Typed or printed name of signee | |

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RECOMBINE, 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 EIGHTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RECOMBINE, LLC" WAS FORMED ON THE SIXTH DAY OF JANUARY, A.D. 2011.

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





Authentication: 202161613

Date: 03-08-17

4906817 8300 SR# 20171663100