

MI7000010273

(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:

Cert. W17-78437
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CLERK OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

DEC 06 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2017

MELISSA RIVERA
69 GAGNE STREET
CHICOPEE, MA 01013

SUBJECT: BAYSTATE RESTORATION GROUP, LLC
Ref. Number: W17000078437

We have received your document for BAYSTATE RESTORATION GROUP, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

THE DOCUMENT YOU SENT FROM THE COMMISSION OF REVENUE DOES NOT MEET STATUTORY REQUIREMENTS WE NEED A GOOD STANDING CERTIFICATE OF EXISTENCE FROM THE MA SECRETARY OF STATE

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 817A00023004



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2017

MELISSA RIVERA
69 GAGNE STREET
CHICOPEE, MA 01013

SUBJECT: BAYSTATE RESTORATION GROUP, LLC
Ref. Number: W17000078437

We have received your document for BAYSTATE RESTORATION GROUP, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 917A00021788



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2017

MELISSA RIVERA
69 GAGNE STREET
CHICOPEE, MA 01013

SUBJECT: BAYSTATE RESTORATION GROUP, LLC
Ref. Number: W17000078437

We have received your document for BAYSTATE RESTORATION GROUP, LLC and your check(s) totaling \$125.00. 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.

The registered agent must sign accepting the designation.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 417A00020015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Baystate Restoration Group, 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:

Melissa Rivera

Name of Person

Baystate Restoration Group

Firm/Company

69 Gagne Street

Address

Chicopee, MA 01013

City/State and Zip Code

Melissa.Rivera@BaystateRG.Com

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

For further information concerning this matter, please call:

Melissa Rivera

413

532-3473

at (_____) _____

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

**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. Baystate Restoration Group, 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. Massachusetts 3. 47-1852658
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. September 17, 2017
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 69 Gagne Street 6. 69 Gagne Street
(Street Address of Principal Office) (Mailing Address)
Chicopee, MA 01013 Chicopee, MA 01013

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

Name: Mark Daviau

Office Address: 1922 SE 21st street
Cape Coral Florida 33990
(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.


(Registered agent's signature)

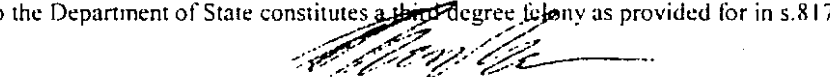
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Owner</u>	<u>Mark Daviau</u>	<u>Office Manager</u>	<u>Melissa Rivera</u>
	<u>Donald Robert</u>		

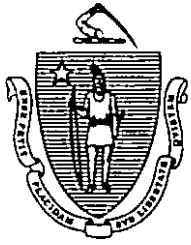
(Use attachments if necessary)

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)

10. 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.


Signature of an authorized person

Mark Daviau
Typed or printed name of signer



William Francis Galvin
Secretary of the
Commonwealth

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

Date: November 29, 2017

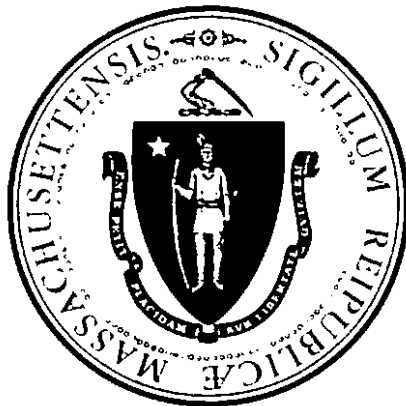
To Whom It May Concern :

I hereby certify that a certificate of organization of Limited Liability Company was filed
in this office by

BAYSTATE RESTORATION GROUP, LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on
November 11, 2014.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation;
that said Limited Liability Company has not been administratively dissolved; and that, so far as
appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

Certificate Number: 17110530710

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

Processed by: