

M18000009164

Florida Department of State  
Division of Corporations  
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((H180002906363)))



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Foreign Limited Liability Company  
Pneumatic Scale LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FAX COVER SHEET**

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Ranae McGraw
DATE	2018-10-05 13:13:46 CST
RE	Pneumatic Scale LLC (2nd)

**COVER MESSAGE**

Seth Crose  
Associate Fulfillment Specialist  
Fulfillment Operations  
CT Corporation

Team (614) 280-3338  
[GlobalFulfillmentTeam@wolterskluwer.com](mailto:GlobalFulfillmentTeam@wolterskluwer.com)

**Wolters Kluwer**

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# 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. Pneumatic Scale LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Massachusetts 3. 04-1734090  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 8020 Forsyth Blvd. 6. 8020 Forsyth Blvd.  
(Street Address of Principal Office) (Mailing Address)  
St. Louis, MO 63105 St. Louis, MO 63105

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 Kristin Bolden  
(Registered agent's signature) Assistant Secretary

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member	Barry-Wehmiller Companies, Inc. 8020 Forsyth Blvd. St. Louis, MO 63105	V.P. + Asst. Sec.	Gregory L. Conrad 8020 Forsyth Blvd. St. Louis, MO 63105

(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.

Gregory L. Conrad  
Signature of an authorized person  
Gregory L. Conrad  
Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



William Francis Galvin  
Secretary of the  
Commonwealth

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

September 27, 2018

TO WHOM IT MAY CONCERN:

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

**PNEUMATIC SCALE LLC**

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **September 27, 2018.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **BARRY-WEHMILLER COMPANIES, INC.**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **BARRY-WEHMILLER COMPANIES, INC. , GREGORY L. COONROD**

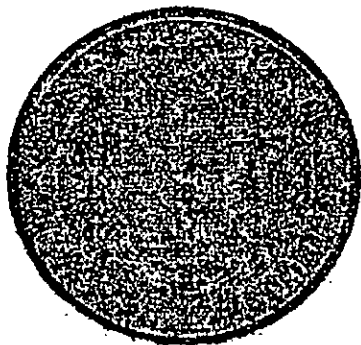
The names of all persons authorized to act with respect to real property listed in the most recent filing are: **GREGORY L. COONROD**

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