

M19000005150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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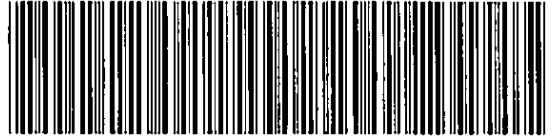
(Business Entity Name)

(Document Number)

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FILED  
2019 MAY 24 PM 4:41  
TALLAHASSEE, FLORIDA

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19 MAY 24 PM 2:01  
TALLAHASSEE, FLORIDA

Y SCOTT

MAY 28 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 772117 8005678

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE : May 17, 2019

ORDER TIME : 12:49 PM

ORDER NO. : 772117-045

CUSTOMER NO: 8005678

FOREIGN FILINGS

NAME: BRUKER SCIENTIFIC, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER: \_\_\_\_\_

TALLAHASSEE, FLORIDA  
2019 MAY 24 PM 4:41  
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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bruker Scientific, 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:

Name of Person	2019 MAY 24 PM 4:41 FILED TALLAHASSEE, FLORIDA
Firm/Company	
Address	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Name of Contact Person at (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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$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. Bruker Scientific, 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. Delaware 3. 33-1064877  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 40 Manning Rd. Billerica, MA 01821 6. 40 Manning Rd. Billerica, MA 01821  
(Street Address of Principal Office) (Mailing Address)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee , Florida 32301  
(City) (Zip code)

2019 MAY 24 PM 4:41  
TALLAHASSEE, FLORIDA

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.

Corporation Service Company Lydia Cohen  
Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Jason Faessler  
☐ Member Address: 40 Manning Rd.  
☐ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Kristin Caplice  
☐ Member Address: 40 Manning Rd.  
☐ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

☒ Manager Name: Kristin Brown  
☐ Member Address: 40 Manning Rd.  
☐ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

☐ Manager Name: Gerald Herman  
☐ Member Address: 40 Manning Rd.  
☒ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

☐ Manager Name: Stefan Ruge  
☐ Member Address: 40 Manning Rd.  
☒ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

☐ Manager Name: Juergen Srega  
☐ Member Address: 40 Manning Rd.  
☒ Authorized Billerica, MA 01821  
Person  
☐ Other ☐ Other

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Jason Faessler

Typed or printed name of signee

2019 JUN 14 PM 4:41  
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FLORIDA  
DEPARTMENT OF STATE

# Delaware

The First State

Page 1


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRUKER SCIENTIFIC 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 SECOND DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRUKER SCIENTIFIC LLC" WAS FORMED ON THE FIFTEENTH DAY OF DECEMBER, A.D. 2000.

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

2019 MAY 24 PM 4:41  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

3329415 8300

SR# 20193474378

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

Authentication: 202754395

Date: 05-02-19