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Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (954)208-0845

Fax Number : (614)573-3996

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: kmanning@veryst.com

Foreign Limited Liability Company

Veryst Engineering LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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Corporate Filing Menu

Help

S. ROBERTS

DEC 28 2022

**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. Veryst Engineering, 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
(Jurisdiction under the law in which foreign limited liability company is organized)

3. _____
(FPI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0903, F.S., to determine penalty liability)

5. 47 Kearney Road
(Street Address of Principal Office)

6. 47 Kearney Road
(Mailing Address)

Needham, MA 02494

Needham, MA 02494

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 Christine Keim
(Registered agent's signature) Assistant Secretary

2022 DEC 27 AM 9:30

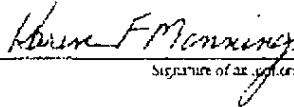
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Stuart Brown</u>	<input type="checkbox"/> Manager	Name: <u>Sean Teller</u>
<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>	<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>
<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>	<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: <u>Matt Hancock</u>	 <input type="checkbox"/> Manager	 Name: <u>Mark Oliver</u>
<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>	<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>
<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>	<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: <u>Mike Karon</u>	 <input type="checkbox"/> Manager	 Name: <u>Andrew Spann</u>
<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>	<input checked="" type="checkbox"/> Member	Address: <u>47 Kearney Road</u>
<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>	<input type="checkbox"/> Authorized	<u>Needham, MA 02494</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

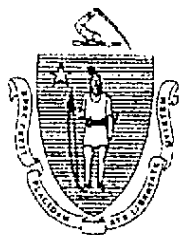
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must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

 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

December 21, 2022

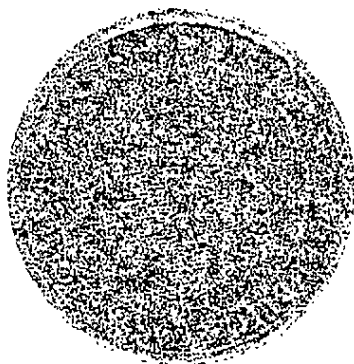
TO WHOM IT MAY CONCERN:

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

VERYST ENGINEERING, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C
on **December 8, 2005**.

I further certify that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; 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