

F 15000001801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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000270668280

03/19/15--01015--002 **70.00

04/27/15--01056--016 **350.00

FILED
15 APR 27 PM 12: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J 4/28/15

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: KEYENCE CORPORATION OF AMERICA
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MELANIE MILLARES
Name of Person
KEYENCE CORPORATION OF AMERICA
Firm/Company
669 RIVER DR, SUITE 403
Address
ELMWOOD PARK NJ 07407
City/State and Zip code
MMILLARES@KEYENCE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MELANIE MILLARES at (201) 930-0100 x70203
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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15 APR 27 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 23, 2015

MELANIE MILLARES
669 RIVER DRIVE
SUITE 403
ELMWOOD PARK, NJ 07407

SUBJECT: KEYENCE CORP OF AMERICA
Ref. Number: W15000020080

We have received your document for KEYENCE CORP OF AMERICA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$950.00.

Please return the corrected original and one copy of 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) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 915A00005748

FILED
15 APR 22 PM 4:46
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. KEYENCE CORPORATION OF AMERICA

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA 3. 33-0087345
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MARCH 1, 1985 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. FRIDAY OCTOBER 26, 2012
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4350 WEST CYPRESS STREET, SUITE 630, TAMPA FL 33607
(Principal office address)
669 RIVER DRIVE, SUITE 403, ELMWOOD PARK NJ 07407
(Current mailing address)

8. 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)

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TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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
By: [Signature] Dona L. Priebe, Assistant VP
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

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15 APR 27 PH 12: 29

A. DIRECTORS

Chairman: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: AKINORI YAMAMOTO

Address: 1-3-14 HIGASHINAKAJIMA, HIGASHIYODOGAWA-KU, OSAKA, JPN

Director: _____

Address: _____

B. OFFICERS

President: KEIICHI KIMURA, CEO

Address: 1-3-14 HIGASHINAKAJIMA, HIGASHIYODOGAWA-KU, OSAKA, JPN 533-8555

Vice President: ROBERT HOSLER, COO

Address: 1100 N. ARLINGTON HTS. RD., ITASCA, IL 60143

Secretary: KATSUMICHI IIZUKA, CFO/TREASURER

Address: 1100 N. ARLINGTON HTS. RD., ITASCA, IL 60143

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. KATSUMICHI IIZUKA, CFO / TREASURER / SECRETARY

(Typed or printed name and capacity of person signing application)

State of California
Secretary of State
CERTIFICATE OF STATUS

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15 APR 27 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENTITY NAME:

KEYENCE CORPORATION OF AMERICA

FILE NUMBER: C1332916
FORMATION DATE: 03/01/1985
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of March 02, 2015.

A handwritten signature in black ink, appearing to read "Alex Padilla".

ALEX PADILLA
Secretary of State

SAG