# F11000003466

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(Address)
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(City/State/Zip/Phone #)
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Florida Division of Corporations New Filing Section/Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

August 23, 2011

Florida Division of Corporations,

Please find enclosed the Certificate of Authority application and fee for A.R.M. Solutions, Inc. They have hired Cornerstone Support, Inc. to file this on their behalf. I have included a stamped self addressed envelope for return proof of filing for your convenience. If you have any questions, please feel free to call me at 770-587-4595.

Please mail any correspondence to: Cornerstone Support, Inc. Attn: Janet Teague 70 Mansell Court, Suite 250 Roswell, GA 30076

#### CONFIDENTIALITY NOTICE

This submission and any attachments contain information from Cornerstone Support, Inc. and are intended solely for the use of the named recipient or recipients. This submission may contain privileged or confidential communications. Any dissemination of this submission by anyone other than an intended recipient is strictly prohibited. If you are not a named recipient, you are prohibited from any further viewing of the information or any attachments or from making any use of the information or attachments. If you believe you have received this information in error, notify the sender immediately and permanently destroy the information, any attachments, and all copies thereof.

Sincerely,

Janet Teague

Licensing Specialist

Cornerstone Support, Inc.

www.Cornessanpport.com

## COVER LETTER

	iling Section on Of Corporations				
SUBJECT:	A.R.M. Solutions	s, Inc.			
JODULCI.			oration - m	ast include suffix	<b>;</b> )
Dear Sir or Ma	dam:				
	Existence," and chec				eact Business in Florida," enced foreign corporation to
Please return a	ll correspondence co	ncerning this	matter to the	following:	
		J	anet Teagu	2	
		(Na	ame of Perso	n)	
		Corne	erstone Sup	port, Inc.	/
•		(Fin	rm/Company	<i>(</i> )	
		70 Man	sell Court, S	Suite 250	
			(Address)		
		Rosv	vell, GA 30	076	
		(City/	State and Zi	p code)	
	ormation concerning	_	lease call:	587-4595	
(Name	of Person)		Area Code &	& Daytime Telep	phone Number)
New F Divisio Clifton 2661 E Tallaha		cle ng amount: Filing Fee &		P.O. Box 63 Tallahassee, 75 Filing Fee &	Section Corporations 27 FL 32314  \$87.50 Filing Fee,
	Certif	icate of Status	s Cer	ified Copy	Certificate of Status & Certified Copy

## 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.

utions, Inc.						
corporation; must include "INCOR lorp," "Inc," "Co," or "Corp.")	PORATED	," "CO	MPAN	Y," "CORPORATIO	ON,"	
able in Florida, enter alternate cor	porate name	adopte	d for the	e purpose of transact	ting business in I	Florida)
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					plicable)	
	5.	Perj	oetual			
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s) of corporation authorized in hon	ne state or co	ountry to	be can	ried out in state of F	lorida) 🚡 📆	62
et address of Florida registered	agent: (P.C	D. Box	NOT a	icceptable)	12	9
<del></del>	•			,	7	
Corporation Service Compa	any	<u></u>				
					<i>if</i>	
1201 Hays Street					N. pr	S
1201 Hays Street Tallahassee			Florida	a_32301	<b>**</b> **********************************	S
	lable in Florida, enter alternate corporation  (Date first transacte (SEE SECTIONS 607.15)  alle Tecate, Suite B Cam (Principal (Current on s) of corporation authorized in homet address of Florida registered and Corporation Service Company (Corporation Service Corporation Service C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")  lable in Florida, enter alternate corporate name  and an	corporation; must include "INCORPORATED," "COCORP," "Inc," "Co," or "Corp.")  lable in Florida, enter alternate corporate name adopted a sunder the law of which it is incorporated)  so of incorporation)  (Date first transacted business in Florid (SEE SECTIONS 607.1501 & 607.1502, F.S. alle Tecate, Suite B Camarillo CA (Principal office address)  (Current mailing address)  on  s) of corporation authorized in home state or country to et address of Florida registered agent: (P.O. Box Corporation Service Company	corporation; must include "INCORPORATED," "COMPAN Corp," "Inc," "Co," or "Corp.")  lable in Florida, enter alternate corporate name adopted for the under the law of which it is incorporated)  5. Perpetual (Duration: Yester)  (Date first transacted business in Florida, if pri (SEE SECTIONS 607.1501 & 607.1502, F.S., to de alle Tecate, Suite B Camarillo CA 9301  (Principal office address)  (Current mailing address)  (Current mailing address)  (Current mailing address)  Corporation Service Company	corporation; must include "INCORPORATED," "COMPANY," "CORPORATION Corp.," "Inc.," "Co.," or "Corp.")  lable in Florida, enter alternate corporate name adopted for the purpose of transact and a second companies. "Inc.," "Co.," or "Corp.")  3. 273535182  r under the law of which it is incorporated)  5. Perpetual (Duration: Year corp. will cease ication  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liable address)  (Current mailing address)  (Current mailing address)  (Current mailing address)  on  s) of corporation authorized in home state or country to be carried out in state of Feet address of Florida registered agent: (P.O. Box NOT acceptable)  Corporation Service Company	corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Corp," "Inc," "Co," or "Corp.")    Iable in Florida, enter alternate corporate name adopted for the purpose of transacting business in I

10. 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.

(Registered agent's signature)

Karin L. Dunn, Assistant VP

11. 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.

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

A. DIRECT	ORS			
Chairman:			·,,,	
Address:				
<u></u>				
Vice Chairman	:	<u> </u>		
Address:				, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Director: B	rad Jadwin			
Address: 37	60 Calle Tecate, Suite B			
Cam	arillo CA 93010			
Director:				
				·
<del></del>				
B. OFFICE	RS	( 179 20 (72 20 (72		
President: B	ad Jadwin	* TT:	<u>*</u> 1000 €	Catalogists of
Address: 37	60 Calle Tecate, Suite B	550	<u>8</u>	STATISTICS, 18 CHINESPOOL
	amarillo CA 93010		<u>-</u>	garga.
hief Information XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	on Officer James Stuart Montgomery	$\alpha_i$		guire:
Address:	3760 Calle Tecate, Suite B		<u>.</u>	
<del></del>	Camarillo CA 93010			
Secretary:				
Address:				
Treasurer:				
Address:				
NOTE: If no	cospary you may attach an addendum to the application listing additional officer	re and/or direct	tors	
	and the state of the state of the supplication fishing additional officer	s allow of direct	1015.	
13.	(Signature of Director or Officer listed in number 12 of the application)	<del></del>		
14	Brad Jadwin President			
	(Typed or printed name and capacity of person signing application)			.,

## State of California Secretary of State

CERTIFICATE OF STATUS

### ENTITY NAME:

A.R.M. SOLUTIONS, INC.

FILE NUMBER: FORMATION DATE:

C3308889 07/15/2010

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

hereby certify:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,

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 August 16, 2011.

DEBRA BOWEN Secretary of State