

7/12/2013 14:49:30 From: To: (850) 617-6381

(1/4)

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
ALBERSMAN & ARMSTRONG, LTD. CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED
13 JUL 11 PM 5:38
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUL 12 PM 4:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

7/15

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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. Albersman & Armstrong, Ltd. Corporation

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

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

2. Minnesota

(State or country under the law of which it is incorporated)

3. 04-3632179

(FEI number, if applicable)

4. 04-02-2002

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

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

7. 333 Washington Avenue North, Suite 107, Minneapolis, MN 55401

(Principal office address)

333 Washington Avenue North, Suite 107, Minneapolis, MN 55401

(Current mailing address)

8. Airport Landside and Urban Planning

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name:

NRAI Services, Inc.

Office Address:

1200 South Pine Island Road

Plantation

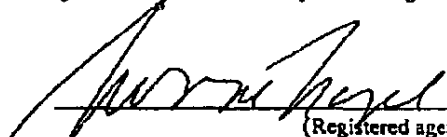
(City)

, Florida 33324

(Zip code)

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.



- Norine Nagel-Asst. Secretary

(Registered agent's signature)

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.

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

A. DIRECTORS

Chairman: David Albersman

Address: 333 Washington Avenue North, Suite 107

Minneapolis, MN 55401

Vice Chairman: Don Armstrong

Address: 333 Washington Avenue North, Suite 107

Minneapolis, MN 55401

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: David Albersman

Address: 333 Washington Avenue North, Suite 107

Minneapolis, MN 55401

Vice President: Don Armstrong

Address: 333 Washington Avenue North, Suite 107

Minneapolis, MN 55401

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. [Signature]

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.

14. Don Armstrong, Senior Vice President

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

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DIVISION OF CORPORATIONS
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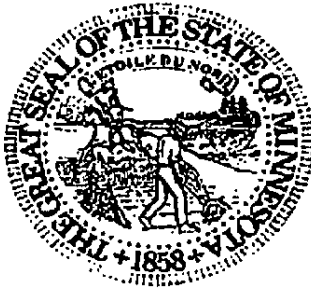
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**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Albersman & Armstrong, Ltd.
Date Filed:	04/02/2002
File Number:	12C-163
Minnesota Statutes, Chapter:	302A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 06/21/2013



Mark Ritchie
Mark Ritchie
Secretary of State
State of Minnesota

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DIVISION OF CORPORATIONS
STATE OF MINNESOTA

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**ALBERSMAN
ARMSTRONG**

UNION PLAZA BLDG., SUITE 107
333 WASHINGTON AVENUE N
MINNEAPOLIS, MN 55401
P 612-349-2778

July 25, 2013

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: New Filing Status

To whom it may concern,

On July 1st, our company mailed, via FedEx, a new filing application which arrived at your office on July 2nd. This filing application was rejected by you because our company name did not include the suffix of "Corporation". We subsequently resubmitted a new filing application with the help of NRAI Corporate Services. This new application was accepted and filed. This letter is to inform you that we will not be resubmitting the original filing application.

Don Armstrong
Albersman & Armstrong, Ltd.
612-348-2778

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