

F13000004250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

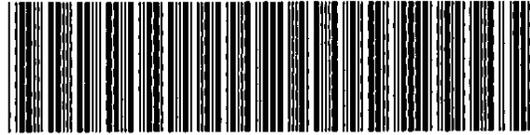
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2019 OCT -1 PM 10:43
NOT ENTERED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
13 OCT -1 AM 8:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CSC

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 824385 7379988
AUTHORIZATION : *Susie Knight*
COST LIMIT : \$ 70.00

ORDER DATE : September 27, 2013
ORDER TIME : 9:35 AM
ORDER NO. : 824385-005
CUSTOMER NO: 7379988

FOREIGN FILINGS

NAME: MANGAN, INC.

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TALLAHASSEE FLORIDA

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: _____

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. Mangan, Inc.

(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

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

3. 33-0539093

(FEI number, if applicable)

4. 8/13/91

(Date of incorporation)

5. Perpetual

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

6.

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

7. 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

(Principal office address)

1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

(Current mailing address)

8. Engineering and Automation Services

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida 32301

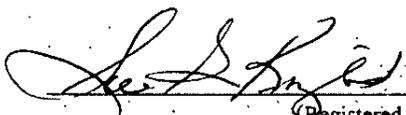
(Zip code)

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TALLAHASSEE FLORIDA

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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.



Sue G. Knight
Assistant Vice President

(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.

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

A. DIRECTORS

Chairman: Amin Solehjou
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Vice Chairman: Lee Juckett
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Director: Josh Akan
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Director: Jacob Depuydt
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

B. OFFICERS

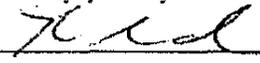
President: Amin Solehjou
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Vice President: Lee Juckett
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Secretary: Steve Simmons
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

Treasurer: Russell Seward
Address: 1500 West Carson Street, Suite 100, Long Beach, CA 90810-1401

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

13. 
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. Russell Seward
(Typed or printed name and capacity of person signing application)

18 OCT - 1 AM 8: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA APPLICATION FOR CERTIFICATE OF
Mangan, Inc.**

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

DIRECTORS

Name	Title	Address
Dave Parks	Director	1500 West Carson Street, Suite 100, Long Beach, CA 90810
Brian Cooper	Director	1500 West Carson Street, Suite 100, Long Beach, CA 90810
Frank Shearman	Director	1500 West Carson Street, Suite 100, Long Beach, CA 90810
Gary Bordeaux	Director	1500 West Carson Street, Suite 100, Long Beach, CA 90810

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

State of California
Secretary of State
CERTIFICATE OF STATUS

ENTITY NAME:

MANGAN, INC.

FILE NUMBER: C1691158
FORMATION DATE: 08/13/1991
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, DEBRA BOWEN, 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 September 27, 2013.

Debra Bowen

DEBRA BOWEN
Secretary of State

RYM