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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Section Division of Corporations				
	SC2 Corp				
SUB.	JECT:	X 6 4		. 1 1 00	
		Name of corporati	on - must	include suffix	
Dear	Sir or Madam:				
"Cert	nclosed "Application by Fo ificate of Existence," or "Ce referenced foreign corpora	rtificate of Good S	tanding" a	and check are sub	
	e return all correspondence di McCann	concerning this mat	ter to the	following:	
		Name o	of Person		
SC2 C	Corp				
		Firm/Co	mpany		- 11
800 C	ourt Street				
		Ado	dress		
Cleary	water, FL 33756	714	a1000		
		City/State	and Zin	code	
chasit	i.mccann@sc2corp.com	Ony, Suite	, und Elp		
	E-mail	address: (to be use	d for futu	re annual report	notification)
т с	Al	. 41.1461	11.	•	
For I	orther information concerning	ig this matter, pleas	e call:		
Kim M. Justice		727	896	896-1042	
	Name of Person	at (Daytime Telep	hone Number
	Name of Person	Alea C	Jue	Daytime Telep	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amoun		ircle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
s \$7	-	75 Filing Fee & tificate of Status		'5 Filing Fee & fied Copy	☐ \$87.50 Filing Fee, 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. SC2 Corp 1. (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) (State or country under the law of which it is incorporated) 26-2174612 (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) 8/1/2015 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 800 Court St., Clearwater, FL 33756 (Principal office address) 800 Court St., Clearwater, Fl 33756 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) America's Business Manager Name: 2435 1st Ave N Office Address: St. Petersburg (City) 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.

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Robert Guidry Chairman: 800 Court St Address: Clearwater, FL 33756 Vice Chairman: Address: **B. OFFICERS** Address: ĆΊ Vice President: Address: Chasiti McCann Secretary: 800 Court Street, FL 33756 Address: Robert Guidry Treasurer: 800 Court Street, FL 33756 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. Robert Guidry 13. _____

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

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SC2 CORP." IS DULY INCORPORATED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWENTY-NINTH DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SC2 CORP." WAS INCORPORATED ON THE SEVENTEENTH DAY OF MARCH, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 10323710

Date: 10-29-15

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