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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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D. SCOTT DEC 8 2016



Florida Division of Corporations New Filing Section/Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

December 05, 2016

Florida Division of Corporations,

Please find enclosed the certificate of authority application and filing fee for Mid-Minnesota Management Services Inc. They have hired Cornerstone Support, Inc. to file this on their behalf. I have provided 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 (678) 740-0504 or email me at jgivens@cornerstonesupport.com.

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

CONFIDENTIALITY NOTICE

This submission and any attachments contain information from Cornerstone Support 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,

Jocelyne Givens Licensing Specialist Cornerstone Support, Inc.

COVER LETTER

TO:	New Filing Section Division of Corpora	ations				
SUBJ	ECT:	Mid-Minnesot	a Managem	ent Services Inc.		
		Name of corpor	ration - mus	include suffix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application b ficate of Existence," o referenced foreign co	r "Certificate of Good	I Standing"	and check are sul		
Please	return all corresponde	ence concerning this r	natter to the	following:		
		Jocel	yne Givens			
		Nan	ie of Person			
antigate a server or very are	rom majorit 211 17 A - B provincial both sign for the terrological of the supply supply and second supply s	Cornerst	one Suppor	t, Inc.		
		Firm	Company			
		70 Manse	ell Court, St	ite 250		
			Address			
		Rosv	vell, GA 300)76		
		City/S	tate and Zip	code		
					:	= 4 5
	F	-mail address: (to be a	used for futi	ire annial report	notification)	F9 a -
For fu	rther information conc	cerning this matter, pl	ease call:			聖婦のこと
	Jocelyne Givens	atf	770	587-4595		FIG Z
	Name of Person		Area Code &	Daytime Teleph	tone Number	STATE STATE STATE
	STREET/COURIE New Filing Section Division of Corpora Clifton Building 2601 Executive Cen Tallahassee, FL 323	tions ter Circle		MAILING A New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7	
Enctos	ed is a check for the f	ollowing amount:				
CI \$71	0.00 Filing Fee 💢	\$78.75 Filing Fee & Certificate of Status		75 Filing Fee & fied Copy		Filing Fee, cate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

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.

Name: Corporation Service Company Mice Address: 1201 Hays Street Tallahassee Florida 32301 (City) (Zip cods)	"ma", "Ca", "colb",	rayon; men men "Tue," "Cn," or "		u eU,"	"COMPANY," "CORPOR	ra i mu ⁱ
(State or country under the law of which it is incorporated) O3/11/1992 (Date of incorporation) (Date first trainsected business in Florida, if prior to registration) (SEB SECTIONS 607.1503 & 607.1502, F.S. to determine penalty liability) 2700 1st St N, Suite 303 (Principal office address) (Curried mailing address) Name: Corporation Service Company (Florida 32301	•	4.*	1. 1.			
MN (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date first triatected business in Florida, if prior to registration) (SER SECTIONS 607.1303 & 607.1302, F.S., to determine penalty liability) 2700 1st St N, Suite 303 (Principal office address) (Conveit mailing address) Name and gireet address of Florida registered agent: (P.O. Box MOT acceptable) Name: Corporation Service Company (City) (City) (Zip code)			· · · · · · · · · · · · · · · · · · ·		•	,
(State or country under the law of which it is incorporated) 03/11/1992 (Date of incorporation) (Date of incorporation) (Date first treitmeted business in Florida, if prior to registration) (SEE SECTIONS 607.133] & 607.1302, F.S., in determine penalty liability) 2700 1st St N, Suite 303 (Principal office address) (Consist mailing address) Name and gired address of Florida registered agent: (P.O. Box MOT acceptable) Name: Corporation Service Company Tice Address: Tallahassee Tallahassee Florida (Zip code)	(If name unavailable i	in Florida, enter a	liarnata corporate	name a	dopted for the purpose of tre	insacting business in Florida
O3/11/1992 5 Perpetual	MN	MN		41-1716641		
(Date first transacted business in Florida, if prior to registration) (SEH SECTIONS 607.1507 & 607.15072, F.S., to determine penalty liability) 2700 1st St N, Suite 303 (Principal affice address) (Conveit mailing address) Name and sirget address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company (City) (Zip code)	(State or country una	lor the law of whi	ch it is incorporat	ed)	(FEI numb	er, if applicable)
Upon qualification (Date first trainected business in Florida, if prior to registration) (SEB SECTIONS 609.1501 & 607.1502, F.S., to determine penalty liability) 2700 1st St N, Suite 303 (Principal office address) (Consent mailing address) Name and sirect address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company flice Address: 1201 Hays Street Tallahassee: , Florida 32301 (Zip cods)	03/11/1	992	and the second	ξ.	Perpetual	:
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Tallahassee Florida 32301 (City) (Zip cods)		,	4 45.0	•). Box NOT accoptable)	
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(City) (Zip cods)	Name:	Corporation	Service Compa	•). Box <u>NOT</u> acceptable)	MASSEL PLON
Registered agent's accoutance:	Name:	Corporation 1201 Ha	Service Compa ys Street	•	27201	MASSEL PLORIDA
Redistered agent's accommoce:		Corporation 1201 Ha	Service Compa ys Street	•	Florida 32301	MASSET, PLORIDA
aving been named as registered agent and to accept service of process for the above stated corporation at t	Name:	Corporation 1201 Ha Tall	Service Compa ys Street	•	Florida 32301	MASSEL FLORIDA
	Name: ffice Address: Registered agent's aving been named a	Corporation 1201 Ha Tall succeptance: sregistered age	Service Compays Street ahassee (City)	iny I sarvi	Florida 32301 (Zip cods	og stated corporation at t
irther agree to camply with the provisions of all statutes relative to the proper and complete performance of	Name: Tice Address: Registered agent's aving been named a cestgrated in this apparate to comp	Corporation 1201 Ha Tall succeptance: se registered age lication, I herei ly with the prov	Service Composite Street ahassee (City) mt and to accept the applications of all sta	iny Eservi pointn tutes r	Florida 32301 (Zip code co of process for the above tout as registered agent a elative to the proper and	es stated corporation at the und agree to act in this co complete parformance of
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this ca orther agree to comply with the provisions of all statutes relative to the proper and complete performance of uties, and I am familiar with and accept the obligations of my position as registered agent.	Name: Mice Address: Registered agent's laving been named a esignated in this appurcher ogree to comp	Corporation 1201 Ha Tall succeptance: se registered age lication, I herei ly with the prov	Service Composite Street ahassee (City) mt and to accept the applications of all sta	iny Eservi pointn tutes r	Florida 32301 (Zip code ce of process for the above the street agent a clatice to the proper and free position as registere.	es stated corporation at t ind agree to act in this co complete performance of d agent.
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10. Attached is a certificate of existence duly nuthenticated, 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.

II. Names	and business addresses of officers and/or directors:
A. DIREC	ORS
Chairman:	
Vice Chairn	n:
•	
Director:	·
North	
Director:	
_	Phaen David Waldron 2700 1st St N, Suite 303 St Cloud, MN 56303
Vice Preside	Vernon Eugene Prososki
Address: _	2700 1st St N, Suite 303
	St Cloud, MN 56303
Secretary: _	-
Address:	
Treasurer:	
Address: _	7.5. 1
	ecessary, you may attach an addendum to the application listing additional officers and/or directors. S
12.	Signature of Director or Officer
are true an	or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein that he or she is aware that false information submitted in a document to the Department of State constitutes a felony as provided for in s.817.155, F.S.
13.	
	(Typed or printed name and capacity of person signing application)

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, 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:

Mid-Minnesota Management Services Inc.

Date Filed:

03/11/1992

File Number:

71-886

Minnesota Statutes, Chapter:

302A

Home Jurisdiction:

Minnesota

This certificate has been issued on:

11/15/2016



Oteve Vimm

Steve Simon

Secretary of State State of Minnesota

16 DEC -7 PH 4: 29
SECRE LARY OF STATE
AND ANASSEE, FLORIDA

Mid-Minnesota Management Services Inc.

LIST OF OFFICERS

President

Phaen David Waldron

2700 1st St N, Suite 303

St Cloud

MN

56303

320-253-8295

Vice President

Vernon Eugene Prososki

2700 1st St N, Suite 303

St Cloud

MN

56303

320-253-8295

16 BC -7 PM 4: 29



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70,00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and cheek. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report

 All Profit Corporations must file an Annual Report yearly to maintain "active"

 status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is

 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the New Filing Section by calling (850) 245-6052 or writing the New Filing Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.