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	(Requestor's Name)		
	(Address)	····	
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL.	
	(Business Entity Name)		
(Document Number)			
Certified Copies	Селіficates of	Status	
Special Instructions	s to Filing Officer:		

Office Use Only



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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

	, WALK IN
	PICK UP: 7-26-17
	CERTIFIED COPY
K	РНОТОСОРУ
	CUS
\$\hat{2}	Filing Foreign
1.	Max Span Muctions CO. (CORPORATE NAME AND DOCUMENT #)
	(CORPORATE NAME AND DOCUMENT#)
2.	(CORPORATE NAME AND DOCUMENT #)
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SPECIA	L INSTRUCTIONS:

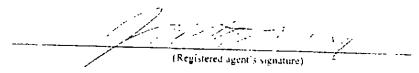
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.	me of corporation; must include "INCORPORATED,"	TATE OF FRANKIDA.	 -
"Inc" "(Co.," "Corp." "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
2		12_10.7014	in Florida I
(State or July 24,	country under the law of which it is incorporated)	(FEI number, if applicable)	
ń.	(Date of incorporation) 5.	(Date of duration, if other than perper	ual)
71325 Route	(Date first transacted business in 1 (SEE SECTIONS 607.1501 & 607.150 : 31 S, Annanuale, NJ 08801	22. F.S., to determine penalty liability)	-
		address, if different)	17 JUL 71
8. Name and Nan	street address of Florida registered agent: (P.O. Jeff Novatt, Esq.	Box NOT acceptable)	26 388 4888
Office Address:	· 		AMII: 2 OF STAT ELECTRO
	Naples (City)	Florida	Ş m

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.

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

	ECTORS Maximillian M.E. Spans, St.		
Address:	1325 Route 31 S	· · ·	
Acuress:	Annandale, NJ 08801		
Vice Chai	irman:		
Address:			
Director:	Virgiene Spann	-	
Address:	1325 Route 31 S		
	Annandale, NJ 08801		
Oirector,	Maximillian M.E. Spann. Jr.		
Address	1325 Route 31 S		
	Annandale, NJ 08801		
B. OFF			, i
President:	· · · · · · · · · · · · · · · · · · ·		:
Address:	1325 Route 31 S	25.	
	Annandale, NJ 08801	<u> </u>	Ċ
Vice Presi	dent:		
Address:		- 등류 십	
C	Loren Spann		
	1325 Route 31 S, Annandale, NJ 08801		
Freasurer			
Address:			
NOTE:	If necessar for our may attach an addendum to the application listing additional officers and/or	directors	
12		w Spm-)
are true a a third de	Signature of Director or Officer or or officer or or director signing this document (and who is listed in number 11 above) affirms that the fand that he or she is aware that false information submitted in a document to the Department of gree felony as provided for in s.817.155. F.S. I Spann, Secretary of Maximillian M.E. Spann To Constant of the C	ets stated here	in
	(Trend or related assessed assessed as a first of the fir		

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

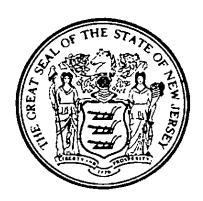
MAX SPANN AUCTIONS CO. 0100458198

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on July 24, 1990.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

MAXIMILLIAN M. SPANN JR. 1325 ROUTE 31 ANNANDALE, NJ 08801



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of July, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6081349796

Verify this certificate online at

https://www.l.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp