

FR90000005675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

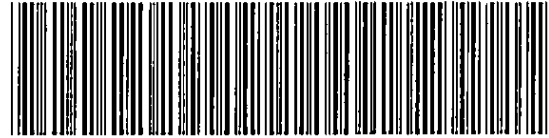
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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2019 DEC 23 9:04

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2019 DEC 23 PM 9:04

T GLASS

DEC 26 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 111203 4726940

AUTHORIZATION

*[Handwritten Signature]*

COST LIMIT : \$ 70.00

ORDER DATE : December 20, 2019

ORDER TIME : 9:03 AM

ORDER NO. : 111203-005

CUSTOMER NO: 4726940

FOREIGN FILINGS

NAME: ABILITY CENTER, INC.

2019 DEC 23 PM 9:04

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ability Center, Inc.  
\_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip code

rreynolds@taftlaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person                      at (\_\_\_\_\_) \_\_\_\_\_  
Area Code                      Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

2/19/03 2:23 PM 9:04

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. Ability Center, 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 3. 33-0654320
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/20/1995 5.
(Date of incorporation) (Date of duration, if other than 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. 4797 Ruffner Street, San Diego, CA 92111
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

RECEIVED FEB 23 11:09:04

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.

[Handwritten signature] Kadesha Roberson
Asst. Vice President
(Registered agent's signature)

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:

**A. DIRECTORS**

Chairman: Darrell T. Heath

Address: 4797 Ruffner Street, San Diego, CA 92111

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: Chad Blake

Address: 4797 Ruffner Street, San Diego, CA 92111

Director: Tom Eastman

Address: 4797 Ruffner Street, San Diego, CA 92111

**B. OFFICERS**

President: Chad Blake

Address: 4797 Ruffner Street, San Diego, CA 92111

Vice President: N/A

Address: \_\_\_\_\_

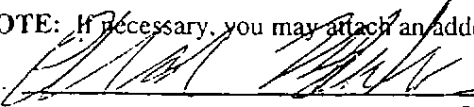
Secretary: Chad Blake

Address: 4797 Ruffner Street, San Diego, CA 92111

Treasurer: Bob Waller

Address: 4797 Ruffner Street, San Diego, CA 92111

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

12. 

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.

13. Chad Blake, President

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

2011 OCT 23 PM 5:04

**State of California**  
**Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

ABILITY CENTER

FILE NUMBER: C1930590  
FORMATION DATE: 03/20/1995  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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.

2019 DEC 06 11:59 AM  
93 17 9604



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of December 06, 2019.

ALEX PADILLA  
Secretary of State