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**F95000002564**

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TALLAHASSEE, FLORIDA

**CT CORPORATION SYSTEM**  
Requestor's Name  
**660 EAST JEFFERSON STREET**  
Address  
**TALLAHASSEE FL 32301 222-1092**  
City State Zip Phone

**CORPORATION(S) NAME**

**600001500806**

**-05/30/95-01010-002**  
**\*\*\*122.50 \*\*\*122.50**

*AMHC Corp*

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DIVISION OF CORPORATION
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| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger         |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark           |
| <input type="checkbox"/> Limited Liability         | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other          |
| <input checked="" type="checkbox"/> Foreign        | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fict. Filing   |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> CUS                    |   |
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*File 1st*

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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. AMHC CORP.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. CALIFORNIA  
(State or country under the law of which it is incorporated)
3. 33-0623626  
(FEI number, if applicable)
4. July 18, 1994  
(Date of Incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660  
(Current mailing address)
8. Any lawful activity for which a corporation may be organized  
(Purpose(s) of corporation authorized in home state or country to be carried out in the State of Florida)
9. Name and street address of Florida registered agent:  
Name: C T CORPORATION SYSTEM  
Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida, 33324  
(Zip Code)

### 10. Registered agent 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.*

C T CORPORATION SYSTEM

Connie Bryan  
(Registered agent's signature) (Officer)

CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY  
(Type Name and Title of Officer)

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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 addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: PAUL N. DONNELLY  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: PAUL N. DONNELLY  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

Director: TIM JAGEMANN  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

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**B. OFFICERS**

President: PAUL N. DONNELLY  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

EXECUTIVE  
Vice President: TIM JAGEMANN  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

Secretary: PAUL N. DONNELLY  
Address: 4621 Teller Avenue, Suite 100  
Newport Beach, CA 92660

Treasurer: PAUL N. DONNELLY

Address: 4621 Teller Avenue, Suite 100

Newport Beach, CA 92660

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

13. ☒ 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TIM JAGEMANN, Executive Vice President

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

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