

	tion/Tax Lien Section of Corporations		- ·
SUBJECT:	Fidelity One	- Corporation	
	(Name of c	orporation - must include suffix)	σ
Dear Sir or Madan	a:	-	
The enclosed "App "Certificate of Exi- to transact business	the substitution and similar	ation for Authorization to Transactitted to register the above reference	t Business in Florida", ced foreign corporation
Please return all co	rrespondence concerning thi	is matter to the following:	•
	JEFFREY C		0003083777-
		Name of Person)	-12/29/990110200 *****78.75 *****78.
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-	1 190 lity UN	e Corporation	<u></u>
	_	irm/Company)	3
	177 South	RIVER ROAD	
		(Address)	
	BEDFORD	NH 03/10	
 :	((City/State/Zip)	
		• • • • • • • • • • • • • • • • • • • •	ing sp
Should you need to	call someone concerning thi	s matter, please call-	9
JEFFREY C	CRUCKERat (613,626-5626	
(Name of Po	erson)	(Area Code & Daytime Telephone	e Number)
			Name / A
STREET ADDRES	S:	MAILING ADDRESS:	Availabition
Qualification/Tax Lie	en Section	Ouglification/Tour Times	Document
Division of Corporati	ions	Qualification/Tax Lien Se Division of Corporations	
100 T2 C1+1	20	P.O. Box 6327	Updater
		Tallahassee, FL 32314	Updeer
Callahassee, FL 3239			1 (
Callahassee, FL 3239	or the following amount:		Verliyer
	or the following amount:		Act nowing as ment
Tallahassee, FL 3239		☐ \$78.75 Filing Fee & ☐ Certified Copy	

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations
SUBJECT: Fidelity One Corporation (Name of corporation - must include suffix)
(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", 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:
TEFFREY CROCKER PROIDENT
TEFFREY CROCKER PROIDENT (Name of Person)
Fidelity One Corporation (Firm/Company)
177 South RIVER ROAD
(Address)
(Address) SEOFMO NH 03/10 (City/State/Zip)
(City/State/Zip)
Should you need to call someone concerning this matter, please call:
Should you need to call someone concerning this matter, please call: Separation State S
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Qualification/Tax Lien SectionQualification/Tax Lien SectionDivision of CorporationsDivision of Corporations409 E. Gaines St.P.O. Box 6327Tallahassee, FL 32399Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Fidelity One Corporation
(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. NEW HAMP SHIZE (State or country under the law of which it is incorporated) 3. OZ-0509)98 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. CDate of incorporation) 5. CDuration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. //30/2000 EST. +/- (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7 177 South RIVER ROAD 2nd Floor
(Current mailing address)
8
10 A
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Philip R. Johnson
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Philip R. Johnson Office Address: 28561 Vinthrop Circle Bonita Springs I , Florida, 34/84 (Zip code)
Bonita Springs 1 Florida 34/84
(Zip code)
10. 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.
Dann
(Registered agent's signature)
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: (Street address ONLY - P.O. Box NOT acceptable)

an: JEFFREY CROCKER	· ·					5
Goffstown NH 03045			<u> </u>		k ·	
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TCERS (Street address only - P.O. Box NOT ac	cceptable)				· · ·	<u> </u>
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14 BEN Circle					<u>-</u>	
Goffotom NH 03045.						
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JEFFREY CROCKER				,		
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SEFFREY CROCKER	- 100	<u></u>	F. hamebay y yay to			···
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If necessary, you may attach an addendum to the application	ation listing a	additional off	icers and/or di	irectors.		
pres	DENT					
(Signature of Chairman, Vice Chairman, or any	_		2 of the applic	cation)		<u> </u>
JEFFREY ENOUKER. (Typed or printed name and ca	Preno					

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State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that FIDELITY ONE CORPORATION is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on JUNE 7, 1999. I further certify that all fees required by the Secretary of State's office have been paid and that articles of dissolution have not been filed.

IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 28th day of December, A.D. 1999

William M. Gardner Secretary of State