

FOOOOOOOO4562

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: CLAIM SERVICES, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

8000003322538-6  
-07/13/00--01084--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

W-18030

GLENN T. DIXON

(Name of Person)

CLAIM SERVICES, INC.

(Firm/Company)

5905 IRON FRAME WAY, SUITE 100

(Address)

COLUMBIA, MD. 21044

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

GLENN T. DIXON

(Name of Person)

at ( 410 ) 884-0825

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
00 AUG -9 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mtu  
8/14

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 19, 2000

GLENN T DIXON  
5905 IRON FRAME WAY, STE 100  
COLUMBIA, MD 21044

SUBJECT: CLAIM SERVICES, INC.  
Ref. Number: W00000018030

We have received your document for CLAIM SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 800A00039553

FILED

00 AUG -9 PM 8:42

SECRET  
NO FORN DISSEM  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11/10/99 BY SP-10/DA

RESOLUTION OF BOARD OF DIRECTORS  
(Please print or type)

I, the undersigned GLENN T. DIXON, do hereby certify  
(Name)

that this Resolution of the Board of Directors of CLAIM SERVICES, INC.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of MD.

was duly adopted on 7-24, 2000

Be it resolved, that CLAIM SERVICES, INC.  
(Corporate Name)

organized and existing in the State of MD., hereby adopts the name

CLAIM SERVICES, INC. OF MD. for use in Florida.

Dated: 7-24-00

Glenn T. Dixon  
Signature of either Chairman, Vice Chairman or any officer

GLENN T. DIXON  
Type or print Name

00-AUG-9 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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. CLAIM SERVICES, INC.  
(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. MD. 3. 52-1997361  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8-14-96 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. WILL BEGIN 7-15-00  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 5905 IRON FRAME WAY, SUITE 100  
COLUMBIA, MD. 21044  
(Current mailing address)

8. ADJUST INSURANCE CLAIMS  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: ROBERT W. STANGE, SR

Office Address: 9609 GREENPOINTE DRIVE

TAMPA, Florida, 33626  
(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.*

  
(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)

GLENN DIXON 5905 IRON FRAME WAY, COLUMBIA MD 21044  
ROY WALLACE 19721 EAGLE MILL RD, PARKTON, MD 21120  
ROBERT STANGE 9609 GREENPOINTE DRIVE, TAMPA FL. 33626

FILED  
00 AUG -9 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: GLENN T. DIXON

Address: 5905 IRON FRAME WAY  
COLUMBIA MD 21044

Vice Chairman: ROY C. WALLACE

Address: 19721 EAGLE MILL ROAD  
PARKTON MD 21120

Director: ROBERT STANGE

Address: 9609 GREENPOINTE DRIVE, TAMPA, FL. 33626

Director: \_\_\_\_\_

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: GLENN T. DIXON

Address: 5905 IRON FRAME WAY  
COLUMBIA, MD. 21044

Vice President: ROY W. WALLACE

Address: 19721 EAGLE MILL ROAD, PARKTON, MD

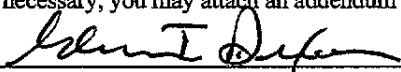
Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

**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. GLENN T. DIXON - PRESIDENT  
(Typed or printed name and capacity of person signing application)

FILED  
00 AUG -9 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CLAIM SERVICES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 05, 2000.



Paul B. Anderson  
Charter Division

FILED  
00 AUG -9 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

