

FOO0000006635⁴

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JP SURVEILLANCE AGENCY 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", 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:

<u>JAMES ELLISON</u> (Name of Person)	FILED 00 NOV 27 AM 11:46 SECRETARY OF STATE TALLAHASSEE, FLORIDA
<u>JP SURVEILLANCE AGENCY INC</u> (Firm/Company)	
<u>P.O. BOX 2471</u> (Address)	
<u>GIG HARBOR WA 98335</u> (City/State and Zip code)	

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For further information concerning this matter, please call:

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*****70.00 *****70.00

JAMES ELLISON at (253) 857-5005
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

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. JP SURVEILLANCE AGENCY 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. Washington 3. 91-1990324
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 28 1999 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. "UPON QUALIFICATION"
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification." (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.))
7. 7282 STINSON AVE NW SUITE D GIG HARBOR WA 98335
(Principal office address)
P.O. Box 2471 GIG HARBOR WA 98335
(Current mailing address)
8. to do surveillance work for insurance companies
(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: Emmy VELIS
Office Address: 6960 SW 111th PLACE
Miami, Florida 33173
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

* Emma P. ("Emmy") Velis
(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: JAMES ELLISON
Address: 12320 98th AVE CT NW
GIG HARBOR WA 98329

Vice Chairman: _____
Address: SAME

Director: SAME
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: JAMES ELLISON
Address: 12320 98th AVE CT NW
GIG HARBOR WA 98329

Vice President: _____
Address: SAME

Secretary: _____
Address: SAME

Treasurer: _____
Address: _____

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

13. James Ellison President
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. JAMES ELLISON PRESIDENT
(Typed or printed name and capacity of person signing application)

STATE of WASHINGTON



SECRETARY of STATE

I, **RALPH MUNRO**, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

JP SURVEILLANCE AGENCY, INC.

I **FURTHER CERTIFY** that the records on file in this office show that the
above named profit corporation was formed under the laws of the
State of Washington and was issued a Certificate of Incorporation
in Washington on July 29, 1999.

I **FURTHER CERTIFY** that as of the date of this certificate, no Articles of Dissolution
have been filed, and that the corporation is duly authorized to
transact business in the corporate form in the State of Washington.

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00 NOV 27 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date: November 13, 2000

*Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital*

ek 
Ralph Munro, Secretary of State