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TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FRANK SOLUTIONS, INCORPORATED  
(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:

GREG TRAINOR  
(Name of Person)

FRANK SOLUTIONS, INCORPORATED  
(Firm/Company)

9250 E. Costilla Avenue - Suite 100  
(Address)

Englewood, CO 80112  
(City/State and Zip code)

FILED  
01 OCT 31 PM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

with  
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-10/31/01--01055--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

For further information concerning this matter, please call:

GREG TRAINOR at (303) 792-5500 ext. 110  
(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. FRANK SOLUTIONS, INCORPORATED  
(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. COLORADO 3. 84-1193356  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/1992 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. 9250 E. Castilla Avenue Suite 100 Englewood Co 80112  
(Principal office address)  
9250 E. Castilla Avenue Suite 100 Englewood Co 80112  
(Current mailing address)
8. INTERACTIVE VOICE RESPONSE - INTERACTIVE WEB RESPONSE  
(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: JOSHUA MORREIRA  
Office Address: 8200 TANGLEWOOD NORTH  
TALLAHASSEE, Florida 32309  
(City) (Zip code)

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**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.*

Joshua Morreira

(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: Bruce Frank  
Address: 9250 E. Castillo Avenue  
Englewood, Co 80112

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

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

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

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

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

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

B. OFFICERS

President: Bruce Frank

Address: 9250 E. Castillo Avenue  
Englewood, Co 80112

Vice President: \_\_\_\_\_

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

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

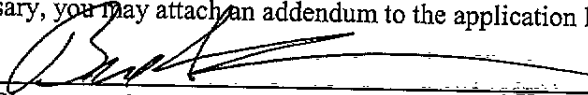
Address: \_\_\_\_\_

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

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

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TALLAHASSEE, FLORIDA

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. Bruce Frank

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



# STATE OF COLORADO

## DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado,  
hereby certify that, according to the records of this office,

FRANK SOLUTIONS, INC.  
(Colorado CORPORATION )  
File # 19921025212

was filed in this office on March 11, 1992 and has complied with the applicable provisions  
of the laws of the State of Colorado and on this date is in good standing and authorized and  
competent to transact business or to conduct its affairs within this state.

Dated: October 23, 2001

**For Validation:**

Certificate ID: 513959

To validate this certificate, visit the following  
web site, enter this certificate ID, then follow the  
instructions displayed.

[www.sos.state.co.us/ValidateCertificate](http://www.sos.state.co.us/ValidateCertificate)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

*Donetta Davidson*

SECRETARY OF STATE