

# F02000002986

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FINANCIAL MARKETING, 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:

SHELDON M. LUSTIG

(Name of Person)

LUSTIG & ASSOCIATES

(Firm/Company)

4711 GOLF ROAD, STE 807

(Address)

SKOKIE, IL 60076

(City/State and Zip code)

For further information concerning this matter, please call:

SHELDON M. LUSTIG

(Name of Person)

at ( 847 ) 679-2000

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

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

BK

**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

FILED  
02 JUN 11 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-06/11/02--01042--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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LAW OFFICES OF  
**LUSTIG & ASSOCIATES**

4711 WEST GOLF ROAD  
SKOKIE, ILLINOIS 60076-1246  
TELEPHONE (847) 679-2000  
FAX (847) 679-2005

June 7, 2002

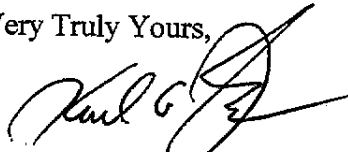
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Financial Marketing, Inc.

Ladies and Gentlemen:

Enclosed herewith please find an Application by Foreign Corporation for Authorization to Transact Business in Florida, a Certificate of Existence from the State of Georgia, and a check in the amount of \$78.75 for your filing fees. Please file the documents and return them to my attention. Should you have any questions, please call me.

Very Truly Yours,



Karl A. Johnson

KAJ/sj  
Enclosures

FILED  
02 JUN 11 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. FINANCIAL MARKETING, 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. GEORGIA

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. DECEMBER 22, 1995

(Date of incorporation)

5. PERPETUAL

(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. 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

(Principal office address)

4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

(Current mailing address)

8. SALE DIRECT MARKETING SERVICES

(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: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION

(City)

, Florida 33324

(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)

James M. Halpin  
Assistant Secretary

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: TRENT D. MARTIN

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

Vice Chairman: TIM KEYSER

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

Director: STEVE RICHARDSON

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

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

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

**B. OFFICERS**

President: TRENT D. MARTIN

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

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

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

Secretary: TIM KEYSER

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

Treasurer: STEVE RICHARDSON

Address: 4481 LEGENDARY DRIVE, STE 150, DESTIN FL 32541

**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 KEYSER - SECRETARY

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

FILED  
JAN 11 11 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

CONTROL NUMBER : K600441  
DATE INC/AUTH/FILED: 12/22/1995  
JURISDICTION : GEORGIA  
PRINT DATE : 04/17/2002  
FORM NUMBER : 211

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JUN 11 AM 10:47  
02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LUSTIG & ASSOCIATES  
SHELDON M. LUSTIG  
4711 GOLF ROAD  
SUITE 807  
SKOKIE, IL 60076

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

**FINANCIAL MARKETING, INC**  
**A GEORGIA PROFIT CORPORATION**

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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*Cathy Cox*

Cathy Cox  
Secretary of State