

F02000006455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
Availability

Document
Examiner

DCC

Updater

Office Use Only

Updater
Verifier

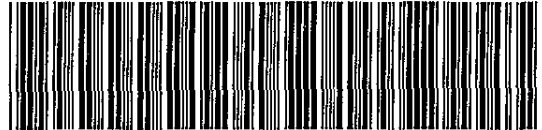
DCC

Acknowledgement

DCC

W. P. Verifier

DCC



800009357368

12/12/02--01097--003 **78.75

FILED
02 DEC 30 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cart

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sovereign Management Corp.
(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:

Bruno D. Trimpoli

(Name of Person)

Sovereign Management Corp.

(Firm/Company)

5304 Burchette Rd.

(Address)

Tampa, FL, 33647

(City/State and Zip code)

FILED
02 DEC 30 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Bruno D. Trimpoli

(Name of Person)

at (813) 978-3100

(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



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

December 13, 2002

BRUNO D. TRIMPOLI
5304 BURCHETTE RD
TAMPA, FL 33647

SUBJECT: SOVEREIGN MANAGEMENT CORP.
Ref. Number: W02000034941

We have received your document for SOVEREIGN MANAGEMENT CORP. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate 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) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 202A00065938

**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. Sovereign Management Corp.
(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. Delaware 3. 52-2039629
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 9, 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. 5304 Burchette Rd.
(Principal office address)

5304 Burchette Rd.
(Current mailing address)

8. Mortgage Broker
(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)

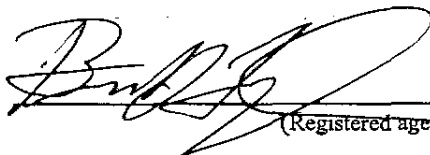
Name: Bruno D. Trimpoli

Office Address: 5304 Burchette Rd.

Tampa, Florida 33647
(City) (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.

FILED
02 DEC 30 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Bruno D. Trimpoli

Address: 5304 Burchette Rd.

Tampa, FL, 33647

Vice Chairman: _____

Address: _____

Director: Donald A. Connor

Address: 115 Muirhead Ave.

Trenton, NJ, 08638-5136

Director: Paul E. Wise

Address: 111 Lahinch Court

Middletown, DE, 19709

B. OFFICERS

President: Bruno D. Trimpoli

Address: 5304 Burchette Rd.

Tampa, FL, 33647

Vice President: _____

Address: _____

Secretary: John H. Williams

Address: 1225 King Street, Suite 700, Wilmington, DE, 19801

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. Bruno D. Trimpoli

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

FILED
02 DEC 30 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

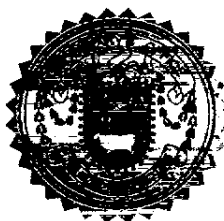
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOVEREIGN MANAGEMENT CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF NOVEMBER, A.D. 2002.

FILED
02 DEC 30 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2941316 8300

020697508

AUTHENTICATION: 2085374

DATE: 11-13-02