

F03000004706

(Requestor's Name)

(Address)

(Address)

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W03-23304
J. BRYAN AUG 15 2003

J. BRYAN SEP 22 2003

GENE R. SOLOMON

Certified Public Accountant

August 9, 2003

1342 Colonial Boulevard
Suite 11
Fort Myers, Florida 33907
Telephone: (239) 939-5303
Fax: (239) 939-1398
E-mail: grsolo@earthlink.net

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

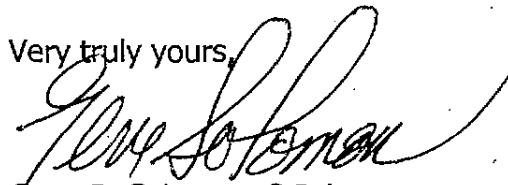
Re: North American Information Services, Inc.

Dear Sir:

Enclosed is a Transmittal Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida for North American Information Services, Inc.

Also enclosed is a check in the amount of \$87.50 as the fee for filing, Certificate of Status and Certified Copy.

Very truly yours,



Gene R. Solomon, C.P.A.

Cc: Don Binns
14524 Riverside Drive
Fort Myers, Florida 33905

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NORTH AMERICAN INFORMATION SERVICES, 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:

GENE R. SOLOMON, C.P.A.
(Name of Person)

SAME
(Firm/Company)

1342 COLONIAL BLVD. STE #11
(Address)

FORT MYERS, FLORIDA 33907
(City/State and Zip code)

For further information concerning this matter, please call:

GENE SOLOMON at (239) 939-5303
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 15, 2003

GENE R. SOLOMON, C.P.A.
1342 COLONIAL BLVD., STE. #11
FORT MYERS, FL 33907

SUBJECT: NORTH AMERICAN INFORMATION SERVICES, INC.
Ref. Number: W03000023304

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for NORTH AMERICAN INFORMATION SERVICES, INC. and your check(s) totaling \$87.50. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 903A00046562

**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. NORTH AMERICAN INFORMATION 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. DELAWARE

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

3. 74-2735845

(FEI number, if applicable)

4. _____

(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. 14524 RIVERSIDE DRIVE FORT MYERS, FLORIDA 33905

(Principal office address)

SAME

(Current mailing address)

8. INVESTMENT IN REAL ESTATE

(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: GENE R. SOLOMON, C.P.A.

Office Address: 1342 COLONIAL BLVD. STE. #11

FORT MYERS

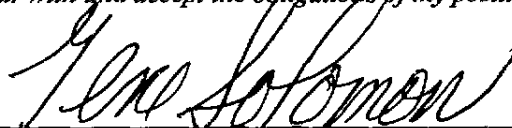
(City)

, Florida 33907

(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.

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TALLAHASSEE, FLORIDA
STATE OF FLORIDA
CORPORATIONS

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

A. DIRECTORS

Chairman: DON W. BINNS

Address: 134 OLD RIDGEFIELD ROAD
WILTON, CONNECTICUT 06897

Vice Chairman: _____

Address: _____

Director: DON W. BINNS

Address: 134 OLD RIDGEFIELD ROAD
WILTON, CONNECTICUT 06897

Director: _____

Address: _____

B. OFFICERS

President: DON W. BINNS

Address: SAME AS ABOVE

Vice President: _____

Address: _____

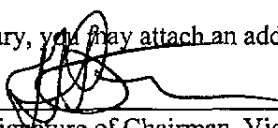
Secretary: DON W. BINNS

Address: SAME AS ABOVE

Treasurer: DON W. BINNS

Address: SAME AS ABOVE

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. DON W. BINNS
(Typed or printed name and capacity of person signing application)

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CHRYSLER CORPORATION
TALLAHASSEE, FLORIDA

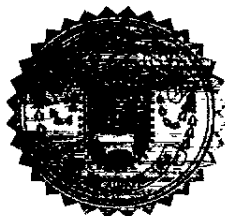
Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTH AMERICAN INFORMATION SERVICES, INC." 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 SIXTH DAY OF SEPTEMBER, A.D. 2003.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2477761 8300

AUTHENTICATION: 2618989

030555772

DATE: 02-06-03