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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANAGEMENT ANALYTYX, 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:

HAROLD CRANE

(Name of Person)

MANAGEMENT ANALYTYX, INC.

(Firm/Company)

23730 NAPOLI WAY

(Address)

BONITA SPRINGS FL 34134

(City/State and Zip code)

For further information concerning this matter, please call:

CHRISTINE V. MARSHALL

(Name of Person)

at (301) 933-4753

(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. MANAGEMENT ANALYTYX, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DISTRICT OF COLUMBIA 3. 52-212211
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/24/98 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1-2-03
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 23730 NAPOLI WAY BONITA SPRINGS FL 34134
(Principal office address)

SAME AS ABOVE
(Current mailing address)

8. CONSULTING
(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 NOT acceptable)

Name: HAROLD CRANE

Office Address: 23730 NAPOLI WAY

BONITA SPRINGS, Florida 34134
(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.

H. Crane
(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: HAROLD CRANE

Address: 23730 NAPOLI WAY BONITA SPRINGS FL 34134

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: HAROLD CRANE

Address: 23730 NAPOLI WAY BONITA SPRINGS FL 34134

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. HAROLD CRANE

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

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



C E R T I F I C A T E

THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the 24th day of **September, 1998** *Articles of Incorporation of:*

MANAGEMENT ANALYTYX INC.

WE FURTHER CERTIFY that the above named corporation is in **Good Standing** and duly incorporated and existing according to the records of Corporations Division, having filed all reports as required by the District of Columbia Business Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this **6th** day of **October, 2004.**

David Clark
DIRECTOR

Winnie R. Huston
Acting Administrator

Business and Professional Licensing Administration


Patricia E. Grays

Superintendent of Corporations
Corporations Division

Anthony A. Williams
Mayor

2004 OCT 6 12 PM '04