(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Ві	isiness Entity Nam	е)
(Do	ocument Number)	
Certified Copies _ ·	_ Certificates	of Status
Special Instructions to		2
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	Office Use Only	,



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Model Management (Name of corpora	Agency, Inc.		
(Name of corpora	ation - must include suffix)		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation as "Certificate of Existence," and check are submitted transact business in Florida.			
Please return all correspondence concerning this ma	tter to the following:		
Richard Gans, Vica	e President		
(Name	e of Person)		
Model Managemen	+ Agency, In	c	
(Firm/	(Company)		
648 Trade Cent	rer Blud.		
648 Trade Cent	ddress)		
Chesterfield m	10 63005		
Chester field, M	ate and Zip code)		
` •	•		
For further information concerning this matter, please	se call:		
Richard Gans at (63	6 1537-4848	×319	
(Name of Person) at (63)	6) 537 - 4848) ea Code & Daytime Telepho	one Number)	
STREET ADDRESS: MAILING ADDRESS:			
Registration Section		Registration Section Division of Corporations	
Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327			
Tallahassee, FL 32399 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. Model (Enter name of c	Management Agency, orporation: nust include "INCORPORATION," "Inc.," "Co.," or "Corp.")	Ti TED,	ac, "COMPANY," "CORPORATION."		
(If name unavail	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting busine	ess in Florida)	•
2. Missour	i	_ 3.	43-1292836 (FEI number, if applicable)		
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)		
4. 4/29/8	3	5.	(Duration: Year corp. will cease to exist or		
/ (Date	of incorporation)	-	(Duration: Year corp. will cease to exist or	r "perpetual")	
6. Previously	Conducted business from 19 (Date first transacted busine (SEE SECTIONS 607.1501 & 60	84 - ess ir 07.15	Florida, if prior to registration) 02. F.S., to determine penalty liability)	business 1987	since
7. 8380	Baymeadows, Suite 14, (Principal office	Jq addı	cksonville, FL 32256 ess)		
648 TV	ade Center Blvd. Ch (Current mailing	<u>es -</u> ; addi	terfield, mo 63005 ess)		
8. Operate (Purpose(s	modeling agency) of corporation authorized in home state	or co	untry to be carried out in state of Florida)		
9. Name and stree	t address of Florida registered agent:	(P.O	. Box NOT acceptable)	05 JEN 21	
Name:	Rich Hersey			MII2	1
Office Address:	8380 Baymeadows, S	الاست	<u>e</u> 14	I P	<u>г</u>
	Jacksonville (City)		, Florida 32256 (Zip code)	PM 2:31	J
10 Registered or	ent's accentance			حبيد	

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.

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

A. DIRE	CTORS
Chairman:	James Gans
Address: _	648 Trade Center Blvd.
	Chesterfield, MO 63005
Vice Chair	nan:
· ,	
Director:	
•	
Addiess	
, <u>-</u>	
B. OFFIC	
President:	Richard Gans
Address: _	648 Trade Center Blud.
	Chesterfield, MO 63005
	ent: James Gans
Address: _	648 Trade Center Blyd.
	Chesterfield, MO 63005
•	Carol Pritcheft
	648 Trade Center Blud Charterfield Mo 63005
	Mark Rothstein
	648 Trade Center Blud., Chesterfield, MO 63005
_	
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	Mun President
	(Signature of Director or Officer listed in number 12 of the application)
14	Richard Gans, President
	(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Matt Blunt Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

MODEL MANAGEMENT AGENCY, INC. 00251702

was created under the laws of this State on the 29th day of April, 1983, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 5th day of November, 2004

Matt Blunt
Secretary of State

Certification Number: 7152226-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification