

F05000002667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900052274929

04/29/05--01026--010 **78.75

FILED

2005 APR 29 PM 2:21

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAY - 4 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPEX LEGAL 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:

HUMILDAD PASIMIO
(Name of Person)
COMPEX LEGAL SERVICES, INC.
(Firm/Company)
325 MAPLE AVENUE
(Address)
TORRANCE, CA 90503
(City/State and Zip code)

FILED
2005 APR 29 PM 2:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

HUMILDAD PASIMIO at (310) 782-1801
(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

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. COMPEX LEGAL SERVICES, 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. DELAWARE

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

3. 95-4443964

(FEI number, if applicable)

4. JUNE 15, 1993

(Date of incorporation)

5. UNKNOWN

(Duration: Year corp. will cease to exist or "perpetual")

6. APRIL 15, 2005

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

7. 325 MAPLE AVENUE, TORRANCE, CA 90503

(Principal office address)

325 MAPLE AVENUE, TORRANCE, CA 90503

(Current mailing address)

8. _____
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

M. T. Fitzpatrick
(Registered agent's signature)

M.T. FITZPATRICK
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: JEFFREY BACHMANN

Address: 325 MAPLE AVENUE TORRANCE CA 90503

Vice Chairman: N/A

Address: _____

Director: NITIN MEHTA

Address: 58 GREEN OAKS DRIVE ATHERTON CA 94027

Director: REEVE WAUD

Address: 560 OAKWOOD AVENUE SUITE 203 LAKE FOREST IL 60045

FILED
2005 APR 29 PM 2:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. OFFICERS

President: JEFFREY BACHMANN

Address: 325 MAPLE AVENUE TORRANCE CA 90503

Vice President: N/A

Address: _____

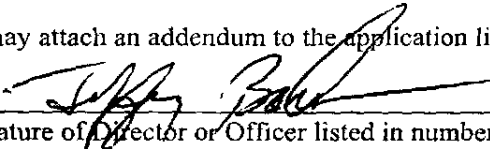
Secretary: N/A

Address: _____

Treasurer: JEFFREY BACHMANN

Address: 325 MAPLE AVENUE TORRANCE CA 90503

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

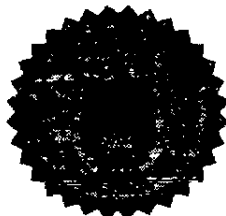
Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMPEX LEGAL 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 EIGHTH DAY OF APRIL, A.D. 2005.

FILED
2005 APR 29 PM 2:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



2340170 8300

050234910

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3800403

DATE: 04-08-05