

F05000006525

(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:

Office Use Only



400061089104

11/07/05 01:05:10 PM 4432.38

RECEIVED
FEB 1 11 50 AM '06
FEB 1 11 50 AM '06

F05-6525
al

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPHERE GROUP, 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:

Lori M. Whitlock

(Name of Person)

Delaware Business Incorporators, Inc.

(Firm/Company)

3422 Old Capitol Trail, Suite 700

(Address)

Wilmington, DE 19808

(City/State and Zip code)

For further information concerning this matter, please call:

Lori Whitlock

(Name of Person)

at (302) 996 5819

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JUN 11 1997
1:50 PM

**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. SPHERE GROUP, 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. 04-3442094

(FEI number, if applicable)

4. December 23, 1996

(Date of incorporation)

5. Perpetual

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

6. Upon Authorization

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

7. 555 Park Shore Drive, #410, Naples, FL 34103

(Principal office address)

same as above

(Current mailing address)

8. Business 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: Joseph J. Simpson

Office Address: 555 Park Shore Drive, #410

Naples

(City)

, Florida 34103

(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.

Joseph J. Simpson
(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: Joseph J. Simpson
Address: 555 Park Shore Dr., #410
Naples, FL 34103

Vice Chairman: NA
Address: _____

Director: NA
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Joseph J. Simpson
Address: 555 Park Shore Drive, #410
Naples, FL 34103

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

RECEIVED
JAN 7 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13. Joseph J. Simpson, President
(Signature of Director or Officer listed in number 12 of the application)
14. Joseph J. Simpson, President
(Typed or printed name and capacity of person signing application)

Delaware

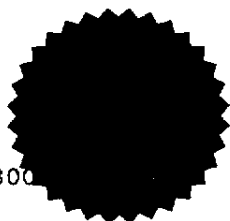
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPHERE GROUP, 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 SECOND DAY OF NOVEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPHERE GROUP, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 1996.



2697672 8300

050894562

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4269106

DATE: 11-02-05