

F05000007051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

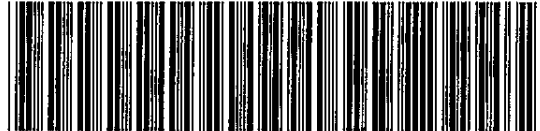
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

CT CORPORATION

December 6, 2005

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

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05 DEC -6 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 6480733 SO  
Customer Reference 1: Multi state registration  
Customer Reference 2:

*Dear Department of State, Florida:*

Please obtain the following:

CCI, Inc. (AK)  
Qualification  
Florida

CCI, Inc. (AK)  
Certificate of Status/Authorization-Foreign  
Florida

CCI, Inc. (AK)  
Cert Copy of Articles of Inc  
Florida

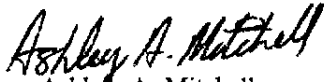
Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960  
Tel. 850 222 1092  
Fax 850 222 7515

CT CORPORATION

Sincerely,



Ashley A Mitchell  
Fulfillment Specialist  
Ashley.Mitchell@wolterskluwer.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960  
Tel 850 222 1092  
Fax 850 222 7515

**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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. CCI, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  
  
CCI, INC. of Alaska  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alaska 3. 92-0132021  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/01/1989 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 111 West 16th Avenue, Suite 401, Anchorage, AK 99501  
(Principal office address)  
  
111 West 16th Avenue, Suite 401, Anchorage, AK 99501  
(Current mailing address)

8. Contracting  
(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)

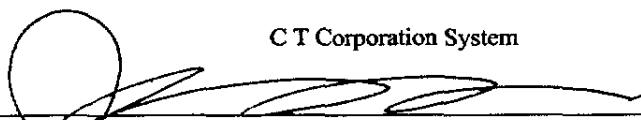
Name: C T Corporation System

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.*

By:   
(Registered agent's signature)

C T Corporation System

JACK CASKEY, ASST. V. P.

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: Melvin Brown

Address: 111 West 16th Avenue, Suite 401  
Anchorage, AK 99501

Vice Chairman: Dan O'Hara

Address: 111 West 16th Avenue, Suite 401  
Anchorage, AK 99501

Director: Andy Golia

Address: 111 West 16th Avenue, Suite 401  
Anchorage, AK 99501

Director: Everette Anderson

Address: 111 West 16th Avenue, Suite 401  
Anchorage, AK 99501

**B. OFFICERS**

President: Keith Burke

Address: 111 West 16th Avenue, Suite 401  
Anchorage, AK 99501

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

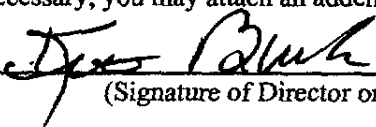
Secretary: April Ferguson

Address: 111 West 16th Avenue, Suite 400, Anchorage, AK 99501

Treasurer: Tom Hawkins

Address: 111 West 16th Avenue, Suite 400, Anchorage, AK 99501

**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. Keith Burke, President/CEO  
(Typed or printed name and capacity of person signing application)

Alaska Entity # 44911D

**State of Alaska**  
**Department of Commerce, Community, and Economic**  
**Development**

**CERTIFICATE**  
**OF**  
**GOOD STANDING**

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

**CCI, INC.**

on the 1st day of December, 1989 filed in this office its Articles of Incorporation, as a Business Corporation organized under the laws of this state.

I FURTHER CERTIFY that said Business Corporation is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 23rd day of September, 2005.

A handwritten signature in dark ink, appearing to read "William C. Noll".

William C. Noll  
Commissioner

Certification Number: 68771-1

Verify this certificate online at <https://myalaska.state.ak.us/business/soskb/verify.asp>