

07/2001 11:12 AM M. BURR KEIM COMPANY 001  
**F06000005174**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000197654 3)))



H060001976543ABC5

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : M. BURR KEIM COMPANY  
Account Number : I19990000242  
Phone : (215) 563-8113  
Fax Number : (215) 977-9386

FILED  
06 AUG - 7 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**MAXIM FINANCIAL GROUP, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

*J 8/8/06*

(((H06000197654 3)))

# 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. Maxim Financial Group, Inc.

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

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

## 2. Pennsylvania

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

## 3. 20-5239574

(FEI number, if applicable)

## 4. July 20, 2006

(Date of incorporation)

## 5. Perpetual

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

## 6. Upon qualification

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

## 7. 911 Cypress Avenue, Elkins Park, PA 19027

(Principal office address)

## 911 Cypress Avenue, Elkins Park, PA 19027

(Current mailing address)

## 8. Financial services.

(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: W. Bradley Munroe, Esquire

Office Address: 239 E. Virginia Street

Tallahassee

(City)

, Florida 32301

(Zip code)

FILED  
06 AUG -7 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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.

W. Bradley Munroe

(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.

(((H06000197654 3)))

(((H06000197654 3)))

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

## A. DIRECTORS

Chairman: Brian PerkinsAddress: 943 Bush Street, Bridgeport, PA 19405Vice Chairman: Michael RaffertyAddress: 1829 Oakmont Street, Philadelphia, PA 19111

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

## B. OFFICERS

President: Brian PerkinsAddress: 943 Bush Street, Bridgeport, PA 19405Vice President: Michael RaffertyAddress: 1829 Oakmont Street, Philadelphia, PA 19111Secretary: Brian PerkinsAddress: 943 Bush Street, Bridgeport, PA 19405Treasurer: Michael RaffertyAddress: 1829 Oakmont Street, Philadelphia, PA 19111

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. \_\_\_\_\_

BRIAN L. PERKINS CHAIRMAN

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

(((H06000197654 3)))

FILED  
06 AUG - 7 AM 10:51  
SECRETARY OF STATE  
HALLMARKS, FLORIDA

((H06000197654 3)))

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

AUGUST 4, 2008

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

**MAXIM FINANCIAL GROUP, INC.**

is duly incorporated under the laws of the Commonwealth of Pennsylvania and  
remains a subsisting corporation so far as the records of this office show, as of  
the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's Office to  
be affixed, the day and year above  
written.

*Pedro A. Contis*  
Secretary of the Commonwealth

Certification Number: 8170519-1  
Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>

((H06000197654 3)))

FILED  
06 AUG -7 AM 10:51  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE