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(Requestor's Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(Address) \_\_\_\_\_

(City/State/Zip/Phone #) \_\_\_\_\_

PICK-UP     WAIT     MAIL

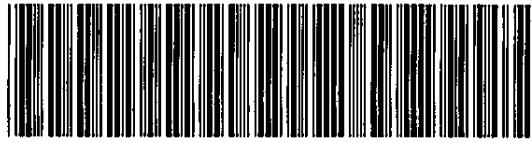
(Business Entity Name) \_\_\_\_\_

(Document Number) \_\_\_\_\_

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
5/9/07

# CORSARO & ASSOCIATES CO., LPA

28039 CLEMENS ROAD  
WESTLAKE OH 44145  
(440) 871-4022/TELEPHONE  
(440) 871-9567/FACSIMILE

May 1, 2007

**VIA UPS 1Z F60 R31 01 9368 6567**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee FL 32301

Re: Application by Foreign Corporation for Authorization to Transact Business in Florida  
Business Communication Analysts, Inc. (a Michigan corporation)  
EIN: 20-5280338

Dear Sir or Madam:

Enclosed herewith, please find the following being submitted on behalf of the above-referenced entity:

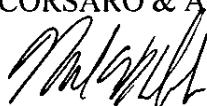
1. Application by Foreign Corporation for Authorization to Transact Business in Florida;
2. Check in the amount of Seventy Dollars (\$70.00) made payable to "Florida Department of State" as the requisite filing fee; and
3. Certificate of Good Standing issued by the State of Michigan on behalf of the above-referenced entity.

After you have processed the enclosed Application, please date stamp the enclosed copy and return it to me.

I am requesting that this Application be expedited.

If you should have any questions and/or comments concerning the enclosed filing, please do not hesitate to contact me.

Sincerely,  
CORSARO & ASSOCIATES CO., LPA



By: Mark A. Kikta, Esq.

MAK/mcm

Enclosures

cc: Mr. Chris Porter (w/encls.) (via U.S. Mail)

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Business Communication Analysts, 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:

Mark A. Kikta, Esq.

(Name of Person)

Corsaro & Associates Co., LPA

(Firm/Company)

28039 Clemens Road

(Address)

Westlake, Ohio 44145

(City/State and Zip code)

For further information concerning this matter, please call:

Mark A. Kikta

(Name of Person)

at ( 440 ) 871-4022

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

New Filing 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

07 MAY -7 AM 10:23  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Business Communication Analysts, 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. Michigan** **3. 205280338**

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

(FEI number, if applicable)

**4. July 27, 2006** **5. perpetual**

(Date of incorporation)

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

**6. N/A**

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

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

**7. 23420 Lorain Ave., Unit 200, #227, North Olmsted, Ohio 44070**

(Principal office address)

**23420 Lorain Ave., Unit 200, #227, North Olmsted, Ohio 44070**

(Current mailing address)

07 MAY 17 2007  
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TALLAHASSEE, FLORIDA  
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**8. to provide basic local exchange service throughout the State of Florida**

(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**

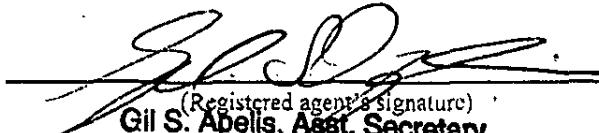
Office Address: **1200 South Pine Island Road**

**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.*

**CT Corporation System**

  
(Registered agent's signature)  
**Gil S. Apolis, Asst. 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: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

07 MAY 7 1981  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
AM 9:20

**B. OFFICERS**

President: Christopher A. Porter

Address: 23420 Lorain Ave., Unit 200, #227

North Olmsted, Ohio 44070

Vice President: Christopher A. Porter

Address: 23420 Lorain Ave., Unit 200, #227

North Olmsted, Ohio 44070

Secretary: Christopher A. Porter

Address: 23420 Lorain Ave., Unit 200, #227, North Olmsted, Ohio 44070

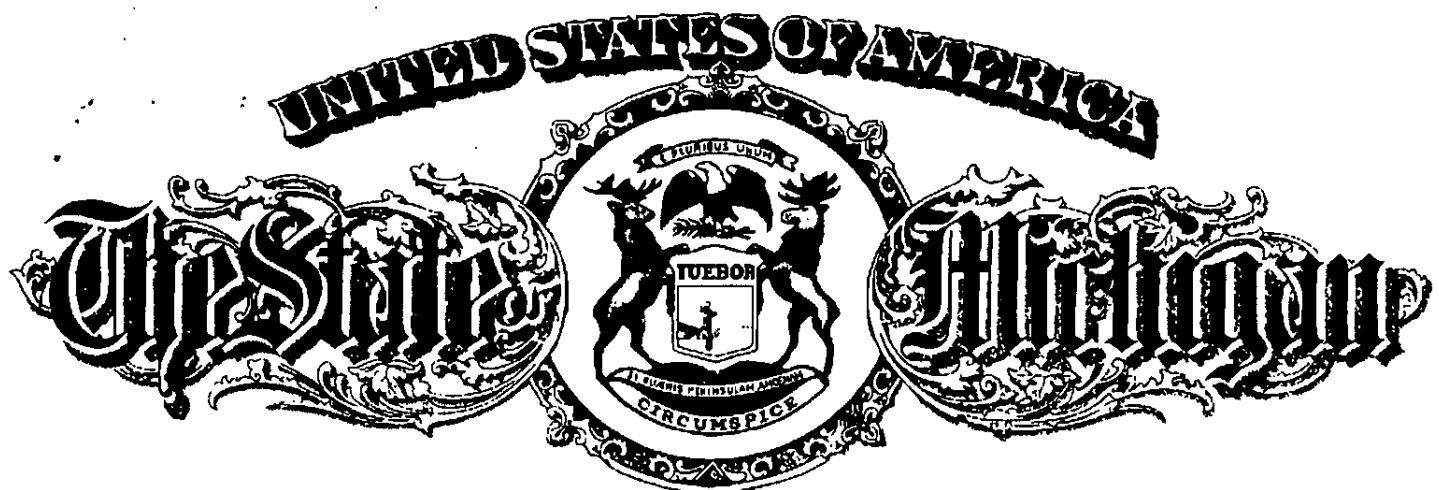
Treasurer: Christopher A. Porter

Address: 23420 Lorain Ave., Unit 200, #227, North Olmsted, Ohio 44070

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

13. Christopher A. Porter  
(Signature of Director or Officer listed in number 12 of the application)

14. Christopher A. Porter, President  
(Typed or printed name and capacity of person signing application)



Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

**BUSINESS COMMUNICATION ANALYSTS, INC.**

a Michigan profit corporation was validly incorporated on July 27, 2006, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

**FILED**

MAY - 7 AM 10 23  
SECRETARY OF STATE  
LAHASSE, FLORIDA

*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of April, 2007.*

*Andrew S. Mitchell*, Director

Bureau of Commercial Services