

F07000005988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

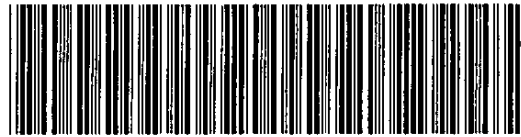
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600112752076

12/07/07--01035--012 **70.00

RECEIVED
07 DEC -7 AM 11:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

07 DEC -7 AM 9:36

APPROVED
AND
FILED



CT

a Wolters Kluwer business

CT
1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel
850 222 7615 fax
www.ctlegalsolutions.com

December 7, 2007

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

Re: Order #: 6770796 WO
Customer Reference 1: None
Customer Reference 2: CA, IL, NY, FL

Dear Department of State, Florida:

Please file the attached:

CROWE PARADIS SERVICES CORPORATION (DE)
Qualification
Florida

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

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

Sincerely,

A handwritten signature in black ink, appearing to be 'J Murphy', written over a circular stamp or seal.

Jennifer Murphy
Fulfillment Specialist
jennifer.murphy@wolterskluwer.com

**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. CROWE PARADIS SERVICES CORPORATION

(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 3. 20-5722557
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/16/2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 09/15/2007
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 55 Ferncroft Road, Suite 404, Danvers, MA 01923
(Principal office address)

same
(Current mailing address)

8. SEE ATTACHMENT
(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.

C T Corporation System

By: Lauren H. KREATZ

(Registered agent's signature)

LAUREN H. KREATZ

SPECIAL ASSISTANT SECRETARY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC -7 AM 9:56

APPROVED
AND
FILED

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: Mark Utay

Address: 55 Ferncroft Road, Suite 404

Danvers, MA 01923

Vice Chairman: Eric Kogan

Address: 55 Ferncroft Road, Suite 404

Danvers, MA 01923

Director: Thomas Goundrey

Address: 55 Ferncroft Road, Suite 404

Danvers, MA 01923

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: Kenneth Paradis

Address: 55 Ferncroft Road, Suite 404

Danvers, MA 01923

Vice President: Christopher Burns

Address: 55 Ferncroft Road, Suite 404

Danvers, MA 01923

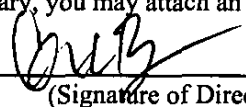
Secretary: Adam Schlesinger

Address: 55 Ferncroft Road, Suite 404, Danvers, MA 01923

Treasurer: _____

Address: _____

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. Christopher Burns, Vice President
(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED
07 DEC -7 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Attachment to Florida
Purpose Clause**

Crowe Paradis Services Corporation is a insurance services business providing Medicare Set-Aside allocations and related services to our broad and growing array of clients which include insurance companies, law firms, third party administrators and self-insured companies.

Officers & Directors

1	Full Name:	Robert Lewis
	Officer/Director:	Officer
	Officer's Title:	Vice President, Sales
	Director's Title:	
	Business Address:	55 Ferncroft Road, Suite 404
	City:	Danvers
	State:	MA
	ZIP Code:	01923

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC - 7 AM 9:36

APPROVED
AND
FILED

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CROWE PARADIS SERVICES CORPORATION" 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 SIXTH DAY OF DECEMBER, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

APPROVED
AND
FILED

07 DEC - 7 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4234189 8300

071292596

You may verify this certificate online
at corp.delaware.gov/authver.shtml

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6215827

DATE: 12-06-07