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SECRETARY OF STATE
ALLAHASSEF, FLORID

B. KOHR
JAN 2 3 2008

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE (:// 4]

AUTHORIZATION

COST LIMIT :

\$ 125.00

ORDER DATE: January 22, 2008

ORDER TIME : 2:27 PM

ORDER NO. : 411256-020

CUSTOMER NO: 167868A

#### FOREIGN FILINGS

NAME: JPSD, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

XX PLAIN STAMPED COPY

\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney -- EXT# 2916

EXAMINER:

## 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.

JPSD, Inc.	amonations moust include "INCORDOR ATI	ED," "COMPANY," "CORPORATION,"
	orporation; must include "INCORPORATI	
(If name unavaila	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)  3. 56-2172681
Delaware		3. 56-2172681
	under the law of which it is incorporated)	(FEI number, if applicable)
11/23/1999		5 Perpetual 7
·	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
),		
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
, c/o CSC - 27	111 Centerville Road, Suite 400	0, Wilmington, DE 19808
,	(Principal office	address)
	(Current mailing	address)
II-14 ODDC	•	
74	property with various potential	al impairments inside & outside franchise area
(Purpose(s	property with various potential) of corporation authorized in home state of	al impairments inside & outside franchise area or country to be carried out in state of Florida)
(Purpose(s	property with various potential) of corporation authorized in home state of taddress of Florida registered agent: (	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s	property with various potential) of corporation authorized in home state of	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s  ). Name and stree  Name:	property with various potential) of corporation authorized in home state of taddress of Florida registered agent: (	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s  ). Name and stree  Name:	property with various potential of corporation authorized in home state of address of Florida registered agent: ( Corporation Service Company	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s  ). Name and stree  Name:	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companion 1201 Hays Street	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s  ). Name and <u>stree</u> Name:  Office Address:	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companion 1201 Hays Street  Tallahassee  (City)	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  19
(Purpose(s ). Name and stree Name: Office Address:	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companion 1201 Hays Street  Tallahassee  (City)  gent's acceptance:	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  Ty
(Purpose(s)  (Purp	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companial 1201 Hays Street  Tallahassee  (City)  gent's acceptance: ed as registered agent and to accept see application, I hereby accept the appoint	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)  (A)  (A)  (B)  (Cip code)  (Cip code)  (Cip code)  (Cip code)  (Cip code)  (Cip code)
(Purpose(s ). Name and stree Name: Office Address:  10. Registered application of the property	property with various potential of corporation authorized in home state of address of Florida registered agent: ( Corporation Service Companial 1201 Hays Street  Tallahassee  (City)  gent's acceptance: ed as registered agent and to accept see application, I hereby accept the appointment of the provisions of all-statute.	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)
(Purpose(s ). Name and stree Name: Office Address: Having been nam designated in this further agree to c and I am familian	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companial 1201 Hays Street  Tallahassee  (City)  gent's acceptance: (City)  gent's acceptance: a gent and to accept see application, I hereby accept the appointment of the provisions of all statutes with and accept the obligations of my	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)
(Purpose(s ). Name and stree Name: Office Address: Having been nam designated in this further agree to c and I am familian	property with various potential of corporation authorized in home state of address of Florida registered agent: ( Corporation Service Companial 1201 Hays Street  Tallahassee  (City)  gent's acceptance: ed as registered agent and to accept see application, I hereby accept the appointment of the provisions of all-statute.	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
(Purpose(s ). Name and stree Name: Office Address: Having been nam lesignated in this further agree to c and I am familian	property with various potential of corporation authorized in home state of taddress of Florida registered agent: ( Corporation Service Companial 1201 Hays Street  Tallahassee  (City)  gent's acceptance: (City)  gent's acceptance: a gent and to accept see application, I hereby accept the appointment of the provisions of all statutes with and accept the obligations of my	al impairments inside & outside franchise area or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)

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: Rebecca Sofley	
Address: 301 S. College Street	<b>.</b>
Charlotte, NC 28288	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Robert (Bob) L. Shotkus	
Address: 301 S. College Street	
Charlotte, NC 28288	
Vice President: Aprille M. Mitchell	
Address: 301 S. College Street	
Charlotte, NC 28288	
Secretary: Rebecca Sofley Henderson	
Address: 301 S. College Street, Charlotte, NC 28288	
Treasurer: James Burr	
Address: 301 S. College Street, Charlotte, NC 28288	
	-
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
(Signature of Director or Officer listed in number 12 of the application)	
(Signature of Director or Officer listed in number 12 of the application)  Rebecca S. Henderson, Director and Secretary of JPSD, Inc.	

(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 "JPSD, 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 TWENTY-SECOND DAY OF JANUARY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JPSD, INC."

WAS INCORPORATED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 1999.

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

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

3131504 8300

080067640

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6326434

DATE: 01-22-08

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