## F08888803286

(Requestor's Name)
(Address)
(Address)
(,
(6) (0) (17)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Numb)
(Document Number)
Certified Copies Certificates of Status
Chariet technistics and Filling Officers
Special Instructions to Filing Officer:
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Office Use Only



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TO: New Filing Section	* * * * * * * * * * * * * * * * * * *	
Division of Corporations		
SUBJECT: JUDSON EDUCATIONA (Name of corporation - must	L ECHNOLOGIES, IVC.	
(Name of corporation - must	include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authoriz		
"Certificate of Existence," and check are submitted to register the transact business in Florida.	ne above referenced foreign corporation to	
Discount on all accounts and are a committee of the Commi	H	
Please return all correspondence concerning this matter to the following:		
ROBERT P. JUDSON (Name of Person)		
(Name of Person)		
(Firm(Company)		
(Name of Person)  JUDISON EDUCATIONAL TECHNOLOGIES, FUC.  (Firm/Company)  17119 PERDIDO KEY DR, #C-34  (Address)		
(Address)		
(Address)  PENSACOLA, FL 3 2 50 7  (City/State and Zip code)		
(City/State and Zip code)		
For further information concerning this matter, please call:		
(Name of Person) at (314) 443 - 8100 (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & I	Dayume Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section Division of Corporations	New Filing Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	
	•	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\sum \\$78.75 Filing Fee & \$\sum \\$78.75 Filing Fee & \$\sum \\$87.50 Filing Fee,		
Certificate of Status Certific	ed Copy Certificate of Status & Certified Copy	
•	17	

## 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. JUDSON EDUCATIONAL TECHNOLOGIES, TNC.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "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)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. M. SSOUR. 3. 43-16328 [ (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 5 1993 5. PERPETUAL (Date of incorporation)  [Duration: Year corp. will cease to exist or "perpetual")
6. VONE 10 2008 (Date first transacted business in Florida, if prior to registration)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 15719 hamas Ridge CT. CHESTERFIELD, MO 63017 (Principal office address)
(Principal office address)
913 CORONET DR. BALLWIN, MO 63011 (Current mailing address)
·
(Purpose(s) of corporation authorized in home state or country to be carried out in 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: ROBERT P. JUDSON
17119 P=2102 K=101 # C-34 - 37 =
Office Address: 1119 PEROIDS REY DI, TO STORY OF THE PROPERTY
Office Address: 17119 PERDIDO KEY DI, # C-34  PENSACOLA, Florida 32507  (City)  (City)  (City)
(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.
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my du
and I am familiar with and accept the obligations of my position as registered agent.

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.

(Registered agent's signature)

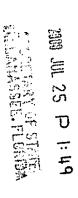
12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: ROBERT P. JYDSON
Chairman: ROBERT P. SYDSON  Address: 17119 PERDIDO KEY Dr. #C-34000000000000000000000000000000000000
PENSACOLA, FL 32507 19
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: ROBERT P. Judson
Address: 17119 Perzoido Key DR. #C-34
PENSACOLA, FL 32507
Vice President: KATHLEEN A. JUDSON  Address: 17119 PERDIDO KELI Dr # C-34
PENSACOLA, FL 32507
Secretary: ROBERT P. JUDSON Address: 17119 PERDIDO KEY Dr. # C-34 PENSACOLA, FL 3250
Address:
Addicss.
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)
(Typed or printed name and capacity of person signing application)

## STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING



I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

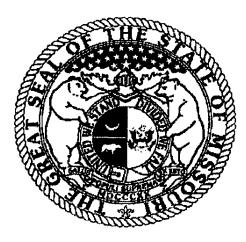
## JUDSON EDUCATIONAL TECHNOLOGIES, INC. 00377807

was created under the laws of this State on the 5th day of March, 1993, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 23rd day of June, 2008

lin Camahan

Secretary of State



Certification Number: 10847747-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification