

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.

(((H08000255827 3)))



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) 617-6381

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620

Phone : (608)827-5300 Fax Number : (608)827-5501

| FOREIGN PRO | FIT/NONPR(SMAC CONSULT | | ORATION OF AS |
|-------------|----------------------------|---------|---------------|
| Certifica | te of Status | 0 | <u>.</u> |
| Certified | Сору | 0 | 1 |
| Page Cou | ınt | 04 | |
| Estimate | d Charge | \$70.00 | |

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

11/13/2008

ά

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.

| | ONSULTING INC. | | | |
|-------------------------------------|---|-----------------------|--|------------------------|
| (Enter name of "Inc.," "Co.," " | corporation; must include "INC Corp," "Inc," "Co," or "Corp.") | ORPORATED," " | COMPANY," "CORPORATION," | |
| | | | • | |
| (If name unava | ilable in Florida, enter alternate | corporate name ado | pted for the purpose of transacting busi | ness in Florida) |
| California | | 3 | | |
| (State or countr | y under the law of which it is inc | corporated) | (FEI number, if applicable |) |
| 9/15/2008 | | 5 | Perpetual Perpetual | |
| (Da | te of incorporation) | | Duration: Year corp. will cease to exist | or "perpetual") |
| | Upan (| uali ei e | eri04 | |
| (Date first trans | acted business in Florida. If cor | poration has not tra | nsacted business in Florida, insert "upo | |
| 23 Journey | (SEE SEC I Aliso Viejo, California 92656 | • | 7.1502 and 817.155, F.S.) | 25 8 |
| 25 Journey, | | | · | <u> </u> |
| | (Prin | cipal office address |) | 5 |
| 23 Journey, | Aliso Viejo, California 92656 | | | SS - 3 |
| | (Curr | ent mailing address |) | rig = |
| Talandalan (| and Madia Duadwation | | · | AH III |
| | And Radio Production | home state or sovet | ry to be carried out in state of Florida) | |
| | | | • | |
| Name and st | reet address of Florida regis | tered agent: (P.0 | D. Box or Mail Drop Box NOT acce | ptable) |
| Name: | Business Filings Incorporate | <u>d</u> | - , | |
| ffice Address: | 1203 Governors Square Blvc | L, Suite 101 | _ | |
| | Tallahassee | | Florida 32301-2960 | |
| | (City) | | _, Florida <u>32301-2960</u> (Zip code) | |
|) Parrietared | igent's acceptance: | | | |
| | | n accent service o | f process for the above stated corpo | ration at the place |
| signated in thi | is application, I hereby accep | t the appointment | t as registered agent and agree to a | ct in this canacity. I |
| riker agree to . .d I om familio | comply with the provisions of | f all statutes relati | ive to the proper and complete perfe | rmance of my duties |
| и х анг јитиц | r with and accept the obligat | ions of my position | n as registered agent. | |
| | • | | | |
| | | 1 | | |
| | 1.1.1.1 | | | |

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:

| 13-5560 | |
|------------------|--|
| | OR ALOU |
| A. DIREC | OB NOV 13 AM 11: 09 |
| Chairman: | SEURETARY OF STATE |
| Address: _ | MOSEE, FI ONIO |
| | , , , , , , , , , , , , , , , , , , , |
| Vice Chaire | nan: |
| | |
| _ | |
| Director: | Scott Gimbel |
| | 23 Journey, Aliso Viejo, California 92656 |
| · | |
| Dispetos | |
| | |
| Address: _ | |
| - | |
| B. OFFIC | |
| | Scott Gimbel |
| Address: _ | 23 Journey, Aliso Viejo, California 92656 |
| - | |
| Vice Presid | lent: Linda Sachs |
| Address: _ | 23 Journey, Aliso Viejo, California 92656 |
| - | |
| Secretary: | Maribel Aranda ` |
| Address: _ | 23 Journey, Aliso Viejo, California 92656 |
| Treasurer: | Scott Gimbel |
| Address: _ | 23 Journey, Aliso Viejo, California 92656 |
| | |
| NOTE: I | f necessary, you may attach an addendam to the application listing additional officers and/or directors. |
| 13 | (Of Prince of Office and Administration of the Administration of t |
| Page | (Signature of Director or Officer listed in number 12 of the application) Gimbel, President |
| 14, <u>Scoil</u> | (Typed or printed name and capacity of person signing application) |

State of California Secretary of State

OB NOV 13 AM II: 09
SECRETARY OF STATE
VALLAHASSEE, FLORIDA

CERTIFICATE OF STATUS

ENTITY NAME:

USMAC CONSULTING INC.

FILE NUMBER:

C3161572

FORMATION DATE:

09/15/2008

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 04, 2008.

DEBRA BOWEN
Secretary of State