

F090000000783

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.

(((H09000042807 3)))



H090000428073ABC/

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

RE-SUBMIT

Please retain original filing
date of submission 2/26/9

RECEIVED
DEPARTMENT OF STATE
09 FEB 26 PM 3:49

FOREIGN PROFIT/NONPROFIT CORPORATION

SVN Management, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	086
Estimated Charge	\$70.00

FILED
09 FEB 24 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

MRD 2/27
2/24/2009



February 25, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORP

SUBJECT: SVN MANAGEMENT, INC.
REF: W09000009062

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000042807
Letter Number: 209A00006610

FILED

09 FEB 24 PM 12:31

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. SVN Management, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"LTD.," "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. California

3. 33-0785332

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

(FBI number, if applicable)

4. 01/14/1998

5. Perpetual

(Date of incorporation)

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

6.

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

7. 18881 Von Karman Ave., Suite 800, Irvine, CA 92612

(Principal office address)

same as above

(Current mailing address)

8.

(Purpose(s) of corporation authorized 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:

(Registered agent's signature)

M.T. FITZPATRICK
ASSISTANT 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. Name and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See Attachment

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: Jack Carroll

Address: 18881 Von Karman Ave. Suite 800

Irvine, CA 92612

Vice President: Burton Young

Address: 18881 Von Karman Ave. Suite 800

Irvine, CA 92612

Secretary: Ran Sperry

Address: 18881 Von Karman Ave. Suite 800 Irvine, CA 92612

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. Aspa-Lisa Lenoir, Asst. Secretary

(Typed or printed name and capacity of person signing application)

**Attachment to Florida
Officers & Directors**

1 **Full Name:** Mark Van Ness
 Officer/Director: Officer
 Officer's Title: CEO
 Director's Title:

Business Address: 18881 Von Karman Ave., Suite 800
 City: Irvine
 State: CA
 ZIP Code: 92612

2 **Full Name:** Anna-Lisa Louler
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:

Business Address: 18881 Von Karman Ave., Suite 800
 City: Irvine
 State: CA
 ZIP Code: 92612

FILED

09 FEB 24 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

SVN MANAGEMENT, INC.

FILE NUMBER: C2024968
FORMATION DATE: 01/14/1998
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 February 20, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State