

F09000002172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

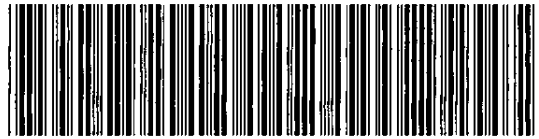
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 MAY 29 PM 12:27
DEPT OF STATE
TALLAHASSEE, FLORIDA

B. McKnight JUN 01 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Aegir Systems

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jack Malone

Name of Person

Aegir Systems

Firm/Company

2151 Alessandro Drive, #211

Address

Ventura, CA 93001

City/State and Zip code

jack.malone@aegir.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jack Malone

Name of Person

at (805) 648-2660 ext 107

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. Aegir Systems, Inc.

(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. California

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

3. 95-3617135

(FEI number, if applicable)

4. April 2, 1981

(Date of incorporation)

5. Perpetual

(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. 791 Bahama Street NE, Palm Bay, FL 32905

(Principal office address)

2151 Alessandro Drive, #211, Ventura, CA 93001

(Current mailing address)

8. Provide consulting services to the transportation industry

(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: InCorp Services, Inc.

Office Address: 17888 67th Court North

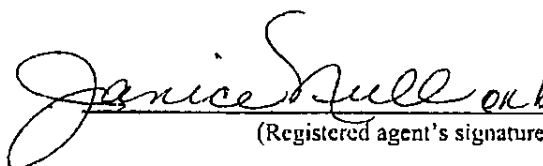
Loxahatchee, Florida 33470

(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.

 on behalf of Incorp Services, Inc.
(Registered agent's signature)

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.

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Ella D. Williams

Address: 379 MISSION DRIVE

Camarillo, CA 93010

Director: Don Midgett

Address: 182 PUEBLO AVENUE

oJAI, CA 93023

B. OFFICERS

President: Ella D. Williams

Address: 379 MISSION DRIVE

Camarillo, CA 93010

Vice President: Jack Malone

Address: 10870 Sunflower Street

Ventura, CA 93004

Secretary: Kathryn Dunaway

Address: P.O. Box 207, Three Rivers, CA 93271

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. **Jack Malone Vice President, Chief Financial Officer**

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

RECEIVED
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CLERK OF STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

AEGIR SYSTEMS

FILE NUMBER: C1022840
FORMATION DATE: 04/02/1981
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

RECEIVED
MAR - 1 1009
AEGIR SYSTEMS INC
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE FLORIDA
MAY 29 PM 12:27
FILED

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 March 06, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State