

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.

(((H09000176964 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 : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

FOREIGN PROFIT/NONPROFIT CORPORATION

Performance Team Freight Systems, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRAISACTO BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED IN A 10: 52 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Inc.," "Co.," "Corp."	ration; must include "INCORPORATEI	D," "COMPANY,"	SECRETARY OF TALLAHASSEE.
	"Inc," "Co," or "Corp.")	,	·
If come unevollable	in Florida enter elternets companie	a adopted for the a	upose of transacting business in Florida)
	-	- ,	impose of transacuting dustriess in Floriday
California		33-0260669	
•	r the law of which it is incorporated)	-	FEI number, if applicable)
October 23, 1987		perpetual	
(Date of in	(corporation)	(Duration: Year	corp. will cease to exist or "perpetual")
•	(Data first transacted business (SEE SECTIONS 607.1501 & 607.1		
11704 Novemble Boule	e T	•	mine paramy manning,
1204 Norwalk Boule	vard, Santa Fe Springs, California 90670 (Principal office ad-		
11204 Norwalk Bonl	evard, Santa Fe Springs, California 9067	•	
	(Current mailing ad		
	(Current manna see	ALL COO.	
Third party logistics a	nd warehousing		
(Purpose(s) of c	corporation authorized in home state or c	country to be carries	d out in state of Florida)
•	lress of Florida registered agent: (P.		
NAME AND BUCCE AND		O. DOX 1101 acc	cymolo,
Name:	C T Corporation System		•
fice Address:	1200 South Pine Island Road		
	Plantation		33324
	(City)	, Florida	(Zip code)
_			
_	(0.9)		(C.F -1-1-)
	s acceptance:		<b>.</b> .
ving been named as	s acceptance: registered agent and to accept serv	vice of process for	the above stated corporation at the pi
iving been named as signated in this appli	s acceptance: registered agent and to accept serv loation, I kereby accept the appoint	rice of process for ment as registered	the above stated corporation at the pid agent and agree to act in this capaci
iving been named as signated in this appli wher agree to comply	s acceptance: registered agent and to accept serv ication, I hereby accept the appoint y with the provisions of all statutes :	rice of process for ment as registered relative to the pro	the above stated corporation at the pid agent and agree to act in this capaciter and complete performance of my
iving been named as signated in this appli ther agree to comply d I am familiar with	s acceptance: registered agent and to accept serv ication, I hereby accept the appoint y with the provisions of all statutes i and accept the obligations of my po	rice of process for ment as registere relative to the pro osition as register	the above stated corporation at the pi d agent and agree to act in this capaci per and complete performance of my ed agent.
iving been named as signated in this appli ther agree to comply d I om familiar with	s acceptance: registered agent and to accept serv ication, I hereby accept the appoint y with the provisions of all statutes :	vice of process for ment as registered relative to the pro- osition as register	the above stated corporation at the pid agent and agres to act in this capaciper and complete performance of my red agent.  The Recurling
iving been named as signated in this appli rther agree to comply d I am familiar with	s acceptance: registered agent and to accept serv ication, I hereby accept the appoint y with the provisions of all statutes i and accept the obligations of my po	vice of process for ment as registered relative to the pro- osition as register	the above stated corporation at the pi d agent and agree to act in this capaci per and complete performance of my ed agent.
signated in this appli rther agree to comply d I am familiar with	s acceptance: registered agent and to accept serv ication, I hereby accept the appoint y with the provisions of all statutes i and accept the obligations of my po	vice of process for ment as registered relative to the pro- osition as register Kimbeth Assistat	the above stated corporation at the pid agent and agres to act in this capaciper and complete performance of my red agent.  The Recurling

under the law of which it is incorporated.

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

A. DIRECTORS

## FILED

Chairman	Michael B. Kaplan	2000 1440			
Address:	11204 Norwalk Boulevard, Santa Fe Springs, California 90670	2004 AUG -5 A 10 52			
		SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Vice Chei		TALLEDASSEE PLURIUM			
	rman:	1			
Address:					
Director:	Michael L. Kaplan				
Address:	11204 Norwalk Boulevard, Santa Fe Springs, California 90670				
Produces,					
Director:	Craig Kaplan, 11204 Norwalk Boulevard, Santa Fe Springs, California 90670				
Address:	11204 Norwalk Boulevard				
. 3					
B. OFF1	CERS Craig Kaplan				
	11204 Norwalk Boulevard				
	lent: Robert Kaplan				
Address:	11204 Norwalk Boulevard	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
-	Michael L. Kapian				
Secretary:	1 1204 Norwalk Boulevard				
Thurday, *	Michael L. Kaplan				
Treasurer:	1204 Norwalk Boulevard				
Address: _	1204 NOI WAIL BOMBYAIG				
NOTE: I	f necessary, you may attach an addendum to the application listing additions				
B 4 -	V (Signature of Director or Officer listed in number 12 of the appl	ication)			
14. Michael L. Kaplan, Secretary and Treasurer  (Typed or printed name and capacity of person signing application)					

State of California Secretary of State

FILED

CERTIFICATE OF STATUS

2009 AUG -5 A 10: 52

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ENTITY NAME:

PERFORMANCE TEAM FREIGHT SYSTEMS, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

6.1

10/23/1987 DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

C1553086

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 August 04, 2009.

> **DEBRA BOWEN** Secretary of State