F09000003668

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne) .
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
		<u> </u>

Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIO!

COVER LETTER

T09.3668

TO: New Filing Section Division of Corporations

SUBJECT: CMG Life Services Inc.	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to repreferenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Richard Laken Mitchell	
Name of Person	<u> </u>
CMG Life Services Inc.	7AT:
Firm/Company	2009 SEP
1016 Collier Center Way, Suite 100	TAS TO
Address	RY O
Naples, FL 34110	T T
City/State and Zip code	器品品
info@cmgsurety.com	
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:	
Richard Laken Mitchell at (239) 597-0128	
Name of Person Area Code & Daytime Telephone Number	er
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:	••
Certificate of Status Certified Cop Cert	0 Filing Fee, ificate of Status & ified 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.

(If name unavail	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting bus	iness in Florida)	
Tennessee		27-0890977		
State or country	under the law of which it is incorporated)	(FEI number, if applicable	;)	
09/09/2009		Perpetual		
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
Not tra	ensacting business prior to regis	tration		
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
1016 Collier	Center Way, Suite 100, Naples, F	FL 34110		
	(Principal office a	address)		
1016 Collier	Center Way, Suite 100, Naples, I	FL 34110		
•	(Current mailing a	address)		
Sandage rel	ated to Life Settlement Industry	ÄLL	190 Test	
		r country to be carried out in state of Floridal		
` '	•		SETARY	
Name and stree	et address of Florida registered agent: (P.O. Box NOT acceptable)	\ _ [
Name:	Richard Laken Mitchell		ARY OF S	
fice Address:	4453 Brynwood Drive, Naples,	FL 34119 CRID	HATE	
	Naples, FL 34110	, Florida 34119 -		
	(City)	(Zip code)		

(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.

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
D:	AACE OF S
Director:	AR SE
Address:	SSER =
	F P
B. OFFICERS	TATE ORIO
President: Richard Laken Mitchell III	
Address: 1016 Collier Center Way, Suite 100, Naples, FL 34110	
Vice President:	
Address:	
Secretary: Robert D. White	
Address: 1016 Collier Center Way, Suite 100, Naples, FL 34110	
Treasurer:	
Address:	
Additess.	
NOTE: If necessary, you may attack an addendum to the application listing additional	officers and/or directors.
3.	
(Signature of Director or Officer listed in number 12 of the applic	eation)
4. Richard Laken Mitchell	
(Typed or printed name and capacity of person signing application)	ion)

Secretary of State Division of Business Services . 312 Rosa L. Parks Avenue 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 09/10/2009 REQUEST NUMBER: 09253143 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/09/2009 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0609751 JURISDICTION: TENNESSEE

TO: BAKER DONELSON BEARMAN & CALDWELL LEE ANN BARHAM 211 COMMERCE ST NASHVILLE, TN 37201

REQUESTED BY: BAKER DONELSON BEARMAN & CALDWELL LEE ANN BARHAM 211 COMMERCE ST NASHVILLE, TN 37201

CERTIFICATE OF EXISTENCE

I, TRE HARGETT, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"CMG LIFE SERVICES INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

211 COMMERCE STREET

NASHVILLE, TN 37201-0000

BAKER DONELSON BEARMAN ETC (NASHVILLE)

ON DATE: 09/10/09

FEES

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00004667579 ACCOUNT NUMBER: 00208389



FROM:

#1000

SECRETARY OF STATE