## Florida Department of State

**Division of Corporations 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.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120080000045

: (302)645-7400

Fax Number

: (302)645-1280

\*\*Enter the email address for this business entity to be used for furn annual report mailings. Enter only one email address please.\*

Email Addres	s:		

## FOREIGN PROFIT/NONPROFIT CORPORATION ESC, INC.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

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Corporate Filing Menu

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: ESC, INC.
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," or "Certificate of Good Standing" 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:
Paul Sponaugle
Name of Person
Harvard Business Services, Inc.
Firm/Company
16192 Coastal Hwy AR 名
Address $\Sigma$
Lewes, DE 19958
City/State and Zip code
harris_maggie@escinc1.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paul Sponaugle at ( 302 ) 644-6263
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building Clifton 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 \$\sqrt{\sq}}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \sqrt{\sqrt{\sintitita}}}}}} \sqrt{\sqrt{\

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## 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.

Delaware		name adopted for the purpose of transacting business in Florida)
	under the law of which it is incorporated	3
•		) (FEI number, if applicable)
January 16,		5. perpetual
,	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
No business	transacted in Florida prior to re	
	(Date first transacted busin (SEE SECTIONS 607.1501 & 6	ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)
8201 Согрога	ite Drive, Suite 1105, Landover	
	(Principal office	e address)
8201 Corpora	ate Drive, Suite 1105, Landover (Current mailing	
(Purpose(s)	Contracting - IT Services of corporation authorized in home state t address of Florida registered agent:	e or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
Name:	NRAI Services, Inc.	
ffice Address:	2731 Executive Park Drive, S	Suite 4 9. 2
	Weston	Florida 33331
	(City)	(Zip code)

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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12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Maggie M. Harris
Address: 8201 Corporate Drive, Suite 1105
Landover, MD 20785
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
President: Maggie M. Harris
Address: 8201 Corporate Drive, Suite 1105
Landover, MD 20785
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. Maggie M. Harris, President  (Typed or printed name and capacity of person signing application)
(1) ped or printed name and capacity of person signing application)

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PAGE

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ESC, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ESC, INC."
WAS INCORPORATED ON THE SIXTEENTH DAY OF JANUARY, A.D. 1992.

PILED

2010 JAN 11 AM 9: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIBA

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100020730



AUTHENTICATION: 7746644

DATE: 01-08-10

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