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DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 31 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: United Core Management, 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:

Geni Taylor
Name of Person
United Core Management, Inc.
Firm/Company
2561 SW Grapevine Pkwy Suite 200
Address
Grapevine Tx 76051
City/State and Zip code
geni.taylor @ uaginc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Geni Taylor at 817, 310-4501
Name of Person 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

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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. United Core Management, 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. Texas 3. 27-3491097
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11-18-10 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 11-18-10
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 5916 mauesser Dr Orlando Florida 32822
(Principal office address)
22313 County Rd. 561 Astatula FL 34705
(Current mailing address)
8. Property Management
(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: Amy Lewis
Office Address: 22313 County Road 561
Astatula, Florida 34705
(City) (Zip code)

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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.

Amy Lewis
(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 N/A

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Carrie Gings

Address: 25601 SW Grapevine Pkwy Suite 200

Grapevine Tx 76051

Vice President: Chief Operating Officer, Timothy Settles

Address: 25601 SW. Grapevine Pkwy, Suite 200

Grapevine, Tx 76051

Secretary: _____

Address: _____

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Timothy Settles COO

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

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TALLAHASSEE, FLORIDA



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for United Core Management, Inc. (file number 801343514), a Domestic For-Profit Corporation, was filed in this office on November 15, 2010.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate TIMOTHY L. SETTLES as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

2561 SW GRAPEVINE PKWY., STE. 200

GRAPEVINE, TX - 76051 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 10, 2011.



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Hope Andrade
Secretary of State

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