Florida Department of State Division of Corporations

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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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FOREIGN PROFIT/NONPROFIT CORPORATION Kropp Holdings, Inc.

Certificate of Status	0
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Page Count	06
Estimated Charge	\$70.00

~9/27/2011

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Kropp Holdings, (Name of corporation - mu	st include suffix)
Dear Sir or Madam:	,
The enclosed "Application by Foreign Corporation for Author "Certificate of Existence," and check are submitted to register transact business in Florida.	ization to Transact Business in Florida," the above referenced foreign corporation to
Please return all correspondence concerning this matter to the	following:
Isabel Diaz (Name of Person	
(Name of Person	
Kropp Holdings, Inc	
(Firm/Company)
9800 NW 41st St. +40 (Address)	00
(Address)	
Miami - FL, 33178	
(City/State and Zip	code)
For further information concerning this matter, please call: Tsobel Dioz at (305) L (Name of Person) (Area Code &	128 80円 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:	
	Filing Fee & S87.50 Filing Fee, Gertificate of Status & Certified Copy

FL013 - 03/03/2004 C T Byrrow Online

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.

i. Kropp	Holdings, Inc		_
(Enter name of cor	poration; must include "HVCORPORATED," "Cp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	\$~
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			三五
	· · · · · · · · · · · · · · · · · · ·	sted for the purpose of transacting business in Florida)	SS
z. <u>Maryl</u> c	and 3.	52-1574498 (FEI number, if applicable)	_ <u>m</u>
	ider the law of which it is incorporated)		
4. 06 0	5.	Perpetual uration: Year corp. will cease to exist or "perpetual")	
(Date o	fincorporation) (Dr	uration: Year corp. will cease to exist or "perpetual")	¥m
6. <u>Upon</u>	registration		
•	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,	rida, if prior to registration) F.S., to determine penalty liability)	
7 9800		Miami-FL 33178	
/	(Principal office address)		•
_ Sar	ne as above.		_
4	(Current mailine address)		•
To pen	form any business	s permitted by the	_
(Purpose(s)	of corporation authorized in home state or country	y to be carried out in state of Florida)	
9. Name and street	address of Florida registered agent: (P.O. Bo	ox NOT acceptable)	
Name:	C T Corporation System	•	
2 - 11111 - 1	1200 South Pine Island Road	-	
Office Address:		-	
	Plantation	, Florida 33324 (Zip code)	
	(City)	(Zip codé)	
0. Registered age	nt's acceptance:		
Having been numed Jesionated in this a	as registered agent and to accept service of polication. I bereby accept the appointment	fprocess for the above stated corporation at the p as registered agent and agree to act in this capa	piace city. I
further agree to con	uply with the provisions of all statutes relati	ve to the proper and complete performance of m	y duties,
and I am familiar w	ith and accept the obligations of my positiv	n as registered agent.	
	C T Corporation System	Barbara A. Burke	
Ву:	Ballers aBull	Special Assistant Secretary	
	(Registered agent's signature)		

1). 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:

PJ.019 - 02/03/2006 CT System Outlier



11 SEP 27 AM 10: 41

A. DIRECTORS		1			SECHETARY OF STATE
Chairman:		10	· · · · · · · · · · · · · · · · · · ·	· .	(ALLA INTOTAL,) LOTE
Address:	· · · · · · · · · · · · · · · · · · ·				
Vice Chairman:					
Director:					
Address:				-	
	Please				
/ice President:	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
Address:					
ecretary;					
OTE: If necessary	you may when it is			sting additional offic	ers and/or directors.
3	(Signature of Directo	or Officer 1	listed in number	12 of the application	3
4. <u>Mi</u>	chael Cle	menti	- Pre		



11 SEP 27 AH 10: 41

SECRETARY OF STATE
TALLAHASSEE FLORIDA

	Kropp Holdings, Inc. (
Title	Name	Address
PRESIDENT:	Michael S. Clementi	9800 NW 41st Street # 400 Miami, FL 33178
SR. VICE PRESIDENT - FINANCE:	Richard D. McMichael	9801 NW 41st Street # 400 Miami, FL 33178
VICE PRESIDENT, TREASURER:	Adrienne Urban	9802 NW 41st Street # 400 Miami, FL 33178
SECRETARY:	R. Alexander Lake	9803 NW 41st Street # 400 Miami, FL 33178
ASSISTANT SECRETARY:	Ada D. Sarmento	9804 NW 41st Street # 400 Miami, FL 33178

STATE OF MARYLAND Department of Assessments and Taxation

I, FAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT KROPP HOLDINGS, INC., INCORPORATED JUNE 07, 1988, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 27, 2011.

Paul B. Anderson Charter Division



SECRETARY OF STATE TALLAHASSEE, FLORIDA

AND.

301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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