F11000004233

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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J. STANORS OCT 20 2011

COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Encompass Supply Chain Solutions, 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:					
Peter Marley					
Name of Person					
Florida Incorporator					
Firm/Company					
619 Cattlemen Rd - Suite O11					
Address					
Sarasota FL 34232					
City/State and Zip code					
state@floridaincorporator.com					
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
Peter Marley at (888) 800-9573					
For further information concerning this matter, please call: Peter Marley Name of Person at (888) 800-9573 Area Code & Daytime Telephone Number (1984) Area Code & Daytime Telephone Number (1984)					
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:					
\$70.00 Filing Fee \$70.00 Filing Fee \$Certificate of Status \$78.75 Filing Fee \$Certificate of Status \$Certificate o					

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.

	Supply Chain Solutions, Inc		
(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp." "Inc." "Co." or "Corp.")	O," "COMPANY," "CORPORATION,"	
44			
		ic adopted for the purpose of transacting business in Florida)	
2. DE		45-0677799	
	under the law of which it is incorporated)	(FEI number, if applicable)	
4. <u>5/4/2011 </u>		: PERPETUAL	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
5		· · · · · · · · · · · · · · · · · · ·	
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
7060 Stat	e Road 84 - #12 Ft Laude		
	(Principal office ad		
1305 Gov	vernors Court - Suite E A	Abingdon, MD 21009	
	(Current mailing ad		
Diethribus	tor of electronic parts		
*	s) of corporation authorized in home state or o	country to be carried out in state of Florida)	
	et address of Florida registered agent: (P.	≥.	20
		District House,	
Name:	Robert B Coolidge	AS	ं 🖺 🏗
Office Address:	10831 Pine Lodge Trail	—————————————————————————————————————	F11 2011 OCT 20
	Davie	, Florida 33328	•
	(City)	(Zip code)	ë D
0. Registered as	gent's acceptance:	E CONTRACTOR DE	
laving been nam	ed as registered agent and to accept serv	lice of process for the above stated corporation at the p	lace

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.

(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:
Director:
Address:
B. OFFICERS
President: Roblet CooleDec
Address: 7060 ST RD 84 Suid 12
DANZE, FL 33377
Vice President: Kimberly Wagner
Address: 1305 Governors Court - Suite E
Abingdon, MD 21009
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Kantely Rulyner
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. Kimberly L Wagner
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENCOMPASS SUPPLY CHAIN SOLUTIONS, 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 ELEVENTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENCOMPASS SUPPLY CHAIN SOLUTIONS, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF MARCH, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

2011 OCT 20 AH ID: 18
SECRETARY OF STATE TALLAHASSEE, FLOTHER

4955032 8300

111088128

Jeffrey W Bullock, Secretary of State

DATE: 10-11-11

You may verify this certificate online at corp.delaware.gov/authver.shtml