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### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: HRTMS, 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:
Laurie Stophens
Laurie Stephens Name of Person
HRTMS, Inc. Firm/Company
·
12157 W Linebaugh Avenue #141
Address
Tampa FL 33626 City/State and Zip code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (919) 795-8899'  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 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 & \$78.75 Filing Fee & Certified Copy  \$78.75 Filing Fee & Certified Copy  \$87.50 Filing Fee, Certified Copy  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 HRTMS, 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. North Carolina 3. 30-0343434
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/12/2005 5. <u>Perpetual</u>
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3434 Edwards Mill Rd, Ste 112-137 Raleigh NC 27612 (Principal office address)
3434 Edwards Mill Rd, Stc 112-137 Raleigh NC 27612 (Current mailing address)
8. To obtain an Unemployment Tax 12 number for 2 employees living (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Florid
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Frank Mitchell Stephens
Office Address: 12157 W Linebaugh Ave #141
Tampa , Florida 33626 (City) (Zip code)
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.

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 of W Linebaugh Aug #141 Vice President: Laurie Stephens Address: 12157 W Linebough Aug #141 Tampa FL 33626 Treasurer: \_ Address: \_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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



# NORTH CAROLINA Department of the Secretary of State

### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### HRTMS INCORPORATED

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 12th day of October, 2005, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of February, 2012.

Elaine I. Marshall

Secretary of State