

(((H12000126353 3)))

## 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 : AKERMAN SENTERFITT - TAMPA  
Account Number : I20000000249  
Phone : (813) 223-7333  
Fax Number : (813) 223-2837SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 MAY - 9 AM 10:34

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

Email Address: \_\_\_\_\_

## FOREIGN PROFIT/NONPROFIT CORPORATION

## Turnaround Underground, Inc.

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

12 MAY - 9 PM 2:30

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Electronic Filing Menu

Corporate Filing Menu

Help

MRS 5/10/12  
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MAY-09-12 01:30PM FROM-

T-397 P.001/006 F-195



May 9, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

AKERMAN SENTERPITT - TAMPA

SUBJECT: TURNAROUND UNDERGROUND, INC.  
REP: W12000025751

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and rafax the complete document, including the electronic filing cover sheet.

Please list the complete Principal and Mailing address on line 7 of the application.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H12000126353  
Letter Number: 112ADD013852

P.O BOX 6327 - Tallahassee, Florida 32314

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T-397 P.003/006 F-195

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## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Turnaround Underground, Inc.  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Good Standing" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Jason L. Margolin  
Name of Person

Akerman Senterfitt  
Firm/Company

401 East Jackson Street

Suite 1700  
Address

Tampa, Florida 33602  
City/State and Zip Code

Jason.Margolin@akerman.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason L. Margolin  
Name of Person

at ( 813 ) 209,5009  
Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

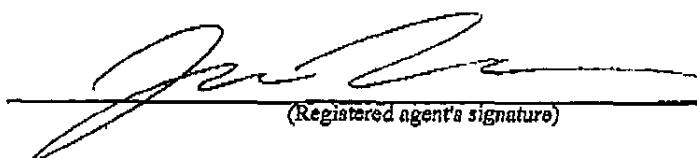
*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:*

1. Turnaround Underground, Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. New York 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. April 29, 2011 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)
7. 401 East Jackson Street, Suite 1700, Tampa, FL 33602  
(Principal office address)
8. To provide networking opportunities for midlevel restructuring professionals.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jason MargolinOffice Address: 401 East Jackson Street, Suite 1700Tampa \_\_\_\_\_, Florida \_\_\_\_\_ Zip Code \_\_\_\_\_  
(City) (Zip Code)

## 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.*

  
(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.

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Steven R. Wirth

Address: 401 East Jackson Street, Suite 1700

Tampa, Florida 33602

Vice Chairman: Jason M. Ebert

Address: 401 East Jackson Street, Suite 1700

Tampa, Florida 33602

Director: Jason L. Margolin

Address: 401 East Jackson Street, Suite 1700

Tampa, Florida 33602

Director: Elena Paras Ketchum

Address: 110 East Madison Street, Suite 200

Tampa, Florida 33602

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. \_\_\_\_\_

Jason Margolin, Director

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

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**State of New York  
Department of State**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA.

I hereby certify, that the Certificate of Incorporation of TURNAROUND UNDERGROUND, INC. was filed on 04/29/2011, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

I further certify that no other documents have been filed by such corporation.



\*\*\*

WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 13th day of April two  
thousand and twelve.



First Deputy Secretary of State

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