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Certified Copies	Certificates	of Status
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Jorgenson Consulting, Inc.	
Name of corpora	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact but	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Todd Jorgenson	
Name	of Person
Jorgenson Consulting, Inc.	
Firm/C	Company
2618A Battleground Ave, #149	
A	ddress
Greensboro, NC 27408	
City/Sta	te and Zip code
todd@jci-inc.net	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Todd Jorgenson at (410	384-7243
	rea 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
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



Todd W. S. Jorgenson Managing Director & Principal 336-370-6360 todd@jci-inc.net

August 10, 2012

Florida Department of State Division of Corporations Tallahassee, Florida 32314

Dear Sir/Madam:

Jorgenson Consulting, Inc (JCI) received letter number 612A00020273 on August 3, 2012 regarding JCI's application to transact business in the state of Florida (Ref. number W12000040810). We mistakenly entered April 2003 as the 'date first transacted business in Florida', as JCI was at one time incorporated in Florida (JCI withdrew our incorporation and business registration with the Division of Corporations in late 2009). After speaking with someone in your Division of Corporations to clarify the information required, it was brought to my attention that we should entered 'upon qualification', not April 2003, as we have not secured the RFP. Prior to being approved by Collier County, we must be registered to do business with the Florida Department of State. We have made the change to the application and appreciate you assistance.

Sincerely,

Todd Jorgenson

850.245.6052 - copy of rejection letter most be industral. classica.

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. Jorgenson C	onsulting, Inc.					
(Enter name of co	orporation; must include "INCOR orp," "Inc," "Co," or "Corp.")	PORATED," "COMPANY," "CORPORATION,"				
(15	Li. Di. ii					
		porate name adopted for the purpose of transacting business in	n Florida)			
2. North Carolin		3. 52-1874549				
	under the law of which it is incorp	porated) (FEI number, if applicable)				
4. September 2	 	5. Perpetual				
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "pe	rpetual")			
6. April, 2003						
		d business in Florida, if prior to registration) 601 & 607.1502, F.S., to determine penalty liability)	· .			
7. 2618A Battleg	round Ave, #149, Greensboro,	, NC 27408				
,	(Principal office address)					
2618A Battle	ground Ave, #149, Greensboro	, NC 27408				
······································	(Current	mailing address)				
	•	•	g cet			
0.	ousiness in the State of Florida		<u>73</u> 🖔			
(Purpose(s)	of corporation authorized in hom	ne state or country to be carried out in state of Florida)				
9. Name and street	address of Florida registered a	agent: (P.O. Box NOT acceptable)	20			
Name:	Joan Jorgenson		į., ·			
Name.						
Office Address:	17026 Passage North		S w			
	Jupiter	, Florida	ப் 🥂			
	(City)	(Zip code)				
10 Doolstored co		•				
10. Registered age Having been name		ccept service of process for the above stated corporation	n at the place			
designated in this d	application, I hereby accept th	e appointment as registered agent and agree to act in t	his capacity. I			
		l statutes relative to the proper and complete performa	nce of my duties,			
ana 1 am jamutar 1	wiin ana accept the obligation	s of my position as registered agent.				
	1. To him					
	(Registered agent)	(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: **B. OFFICERS** President: Todd Jorgenson 2618A Battleground Ave, #149 Address: Greensboro, NC 27408 Vice President: _____ 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. Todd Jorgenson (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

JORGENSON CONSULTING, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of September, 2010, 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.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of August, 2012.

Secretary of State

Elaine I. Marshall

Certification# 93099336-1 Reference# 11140368- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification