

F120000004624

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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From: Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
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FOREIGN PROFIT/NONPROFIT CORPORATION
Investigation Solutions, Inc.

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

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Help

MRB11/15/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: INVESTIGATION 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:

Patricia Briand, Legal Dept.

Name of Person

INVESTIGATION SOLUTIONS, INC.

Firm/Company

c/o Brown & Brown, Inc.

Address

655 N. Franklia St., Suite 1900, Tampa FL 33602

City/State and Zip code

pbriand@bbinslegal.com

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

For further information concerning this matter, please call:

Patricia Briand

at (813) 222.4226

Name of Person

Area 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

**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. INVESTIGATION SOLUTIONS, 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. California 3. 27-2021248
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/20/2010 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 701 B STREET, SUITE 2100, SAN DIEGO, CA 92101
(Principal office address)
701 B STREET, SUITE 2100, SAN DIEGO, CA 92101
(Current mailing address)

8. To engage in any act or activity for which corporations may be organized.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

CT Corporation System

By: Madonna Cuddihy
(Registered agent's signature)

Madonna Cuddihy
Special Assistant Secretary

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

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

A. DIRECTORS

Chairman: SEE ATTACHED LIST

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHED LIST

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 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. Laurel L. Grammig, Vice President & Secretary

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

**Investigation Solutions, Inc.
California**

Management Structure

Management Name	Title	Address
Walker, Chris L.	Director & CEO	701 B Street, Suite 2100 San Diego, California 92101, United States
Randall, William	Director & Vice President	701 B Street, Suite 2100 San Diego, California 92101, United States
Marshall, Scott	President	701 B Street, Suite 2100 San Diego, California 92101, United States
Grammig, Laurel L.	Vice President & Secretary	655 N. Franklin St., Suite 1900 Tampa, Florida 33602, United States
Stahl, Lisa	Vice President	701 B Street, Suite 2100 San Diego, California 92101, United States
Sedillo, Ronda	Treasurer	701 B Street, Suite 2100 San Diego, California 92101, United States
Walker, Cory T.	Vice President	220 S. Ridgewood Avenue Daytona Beach, Florida 32114, United States

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State of California
Secretary of State

CERTIFICATE OF STATUS

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TALLAHASSEE, FLORIDA

ENTITY NAME:

INVESTIGATION SOLUTIONS, INC.

FILE NUMBER: C3299682
FORMATION DATE: 04/20/2010
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 13, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State

KAW

NP-25 (REV 1/2007)