

F1300000/844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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13 APR 26 PM 4:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 4/29

April 17, 2013

Florida Department of State  
Division of Corporations  
New Filing Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Gentlemen:

Please find the attached documents in the following order:

- 1.) Carlson Associates, Inc. check # 7346 made payable to Florida Department of State Division of Corporation for \$70.00.
- 2.) COVER LETTER regarding CDC Associates, Inc. dba Carlson Associates, Inc.
- 3.) APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA for CDC Associates, Inc. dba Carlson Associates, Inc.
- 4.) An original certificate of good standing from the state of incorporation – Delaware, for CDC Associates, Inc.

Please let me know if you have any questions.

Sincerely,



Karen Waller

CDC Associates, Inc. dba Carlson Associates, Inc.  
34 Executive Park, Suite 250  
Irvine, CA 92614  
Phone (949) 251-0455  
Fax (949) 251-0465

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CDC Associates, Inc. dba Carlson Associates, 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:

Karen Waller

Name of Person

CDC Associates, Inc.

Firm/Company

34 Executive Park, Suite 250

Address

Irvine, CA 92614

City/State and Zip code

kwaller@carlson-dc.com

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

For further information concerning this matter, please call:

Karen Waller

Name of Person

at ( 949 ) 251-0455

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. CDC Associates, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Carlson Associates, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 75-3115293

(FEI number, if applicable)

4. 05/13/03

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. May 1, 2013

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

7. 34 Executive Park, Suite 250, Irvine, CA 92614

(Principal office address)

34 Executive Park, Suite 250, Irvine, CA 92614

(Current mailing address)

8. Architectural and Engineering Firm

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(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.*

Corporation Service Company

By: Rosemarie Gagliardino

(Registered agent's signature)

**Rosemarie Gagliardino**  
**Assistant VP**

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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: Harold E Adams, Jr.

Address: 34 Executive Park, Suite 250

Irvine, CA 92614

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: William B Fraser

Address: 34 Executive Park, Suite 250

Irvine, CA 92614

Vice President: John L Watts

Address: 34 Executive Park, Suite 250

Irvine, CA 92614

Secretary: John L Watts

Address: 34 Executive Park, Suite 250, Irvine, CA 92614

Treasurer: William B Fraser

Address: 34 Executive Park, Suite 250, Irvine, CA 92614

**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. John L Watts - Vice President / Secretary

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

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TALLAHASSEE, FLORIDA

# Delaware

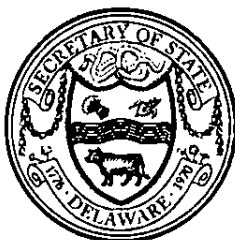
*The First State*

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13 APR 26 PM 4:19  
SECRETARY OF STATE  
JEFFREY W. BULLOCK  
PAG 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CDC ASSOCIATES, 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 EIGHTH DAY OF APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



3658167 8300

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0340852

DATE: 04-08-13