

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.

(((H130000924103)))



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To:

Please retain original filing

Division of Corporations

Fax Number : (850)617-6381

date of submission 4/29

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092 : (850)878-5368

Phone Fax Number

•

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

Email .	Addr	89	8	•	_
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FOREIGN PROFIT/NONPROFIT CORPORATION

Real Asset Management, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED

13 HAY -1 PM 4: 06

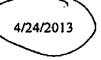
Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

MD 5/2



COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Real Asset Management, Inc.				
	ion - must include suffix			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Subove referenced foreign corporation to transact bus	Standing" and check are submitted to register the			
Please return all correspondence concerning this ma	tter to the following:			
Mark McHugh				
Name	of Person			
Real Asset Management				
Firm/C	ompany			
50 Franklin Street, Suite 420				
Ad	dress			
Boston, MA 02110				
City/State	s and Zip code			
mmchugh@ramplc.com				
E-mail address: (to be use	d for future annual report notification)			
For further information concerning this matter, pleas	e call:			
Mark McHugh at (617	426-0893			
Name of Person Are	a Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
New Filing Section New Filing Section				
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle	1 Executive Center Circle Tallahassee, FL 32314			
Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy			

FLD19 - 1 L/LS/2812 Weiters Klower Online

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Real Asset Ma	nagement, Inc.	
(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATE! Corp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"
(If name unavai	lable in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florid
Iowa		3. 20-1646661
State or country	under the law of which it is incorporated)	(FEI number, if applicable)
9/17/2004 Perpetual		Perpetual 5.
(Date	(Date of incorporation) (Duration: Year corp. will	
609 Court Ave, 5	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, P.S., to determine penalty liability)
309 Court Ave, S	(SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office se	.1502, F.S., to determine penalty liability)
309 Court Ave, S	(SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309	.1502, F.S., to determine penalty liability)
,	(SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office se	.1502, F.S., to determine penalty liability)
Developme	(SES SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office se (Current mailing se	ddress)
Developme: (Pufpose((SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office ac (Current mailing ac ext and installation of software	ddress) ddress) country to be carried out in state of Florida)
Developme: (Pufpose((SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office ac (Current mailing ac nt and installation of software s) of corporation authorized in home state or	ddress) ddress) country to be carried out in state of Florida)
Developmes (Pufpose) Name and <u>stre</u> Name:	(SEE SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office ac (Current mailing ac nt and installation of software s) of corporation authorized in home state or one address of Florida registered agent: (F	ddress) ddress) country to be carried out in state of Florida)
Developme: (Pufpose(Name and <u>stre</u>	(SES SECTIONS 607.1501 & 607. Suite 244, Des Moines, IA 50309 (Principal office ac (Current mailing ac nt and installation of software s) of corporation authorized in home state or est address of Florida registered agent: (P	ddress) ddress) country to be carried out in state of Florida)

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.

By: CT Corporation System Vice President

(Registered agent's signature dent

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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12. Nam	nes and business addresses of officers and/or directors:	
A. DIRI	ECTORS	野 3
Chairman	George Snelgrove	<u> </u>
Address:	309 Court Ave.	表 2
	Des Moines, IA 50309	S
/ice Chai	irman: Marcus Scholes	FS
\ddress:	50 Franklin Street	95 G
	Boston, MA 02110	P
Director:		
lddress:		
	<u> </u>	
irector:		
ddress:		
. OFF	ICERS	*
resident:	George Snelgrove	
	309 Court Ave.	
	Des Moines, IA 50309	<u> </u>
ice Presi	dent:	
ddress:		
ecretary:	Stafford Fitch-Bunce	
	309 Court Ave., Des Moines, IA 50309	
reasurer:	Stafford Fitch-Bunce	
	309 Court Ave., Des Moines, IA 50309	
OTE:	If necessary, you may attach an addendum to the application listing additional officers and/or	directors.
·M	Signature of Director or Officer	 _
he offic	Signature of Director or Officer er or director signing this document (and who is listed in number 12 above) affirms that the fand that he or she is aware that false information submitted in a document to the Department of gree felony as provided for in s.817.155, F.S.	cts stated herein State constitutes
4. Marc	aus J. Scholes	
``	(Typed or printed name and capacity of person signing application)	

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IOWA SECRETARY OF STATE MATT SCHULTZ



CERTIFICATE OF EXISTENCE

TILED

13 APR 24 AM 10: 03

13 APR 24 AM 10: 03

Date: 4/24/2013

Name: REAL ASSET MANAGEMENT, INC. (490 DP - 299847)

Date of Incorporation: 9/17/2004

Duration: PERPETUAL

- I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of lowa.
 - b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. Articles of dissolution have not been filed.

Certificate ID: CS78969

To validate certificates visit: sos.iowa.gov/ValidateCertificate

Mutt Schultz, Iowa Secretary of State