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Office Use Only



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DIVISION OF CORFORATIONS
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COVER LETTER

TO: New Filing Section Division of Corp.				
SUBJECT: Time		NC		
SUBJECT: THE			a - must include suffix	
	Name of Co	ιροιατιοι	i - must metude surrix	
Dear Sir or Madam: .				
The enclosed "Application "Certificate of Existence above referenced foreign	," or "Certificate of G	lood Sta	nding" and check are sub	
Please return all correspo	ondence concerning th	is matte	r to the following:	
Paul Carruth	_		C	
***************************************	1	Name of	Person	***************************************
Time On Targ	et, INC			
	· · · · · · · · · · · · · · · · · · ·	irm/Con	npany	
515 N Flagler			. ,	
		Addr	ess	, , , , , , , , , , , , , , , , , , ,
West Palm Be	ach. FL			
		v/State a	nd Zip code	
TimeOnTarget0		•	,	
<u> </u>			for future annual report	notification)
For further information c	oncerning this matter	, please	call:	
Paul Carruth		561	244-2550	
Name of Person	at (Code & Daytime Teleph	one Number
· ····································			code & Bayanne Polopii	one rumoer
STREET/COUR New Filing Secti Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle		MAILING A New Filing Se Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Enclosed is a check for the	ne following amount:			
□ \$70.00 Filing Fee	\$78.75 Filing Fee Certificate of Sta		\$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.

(If name unavail	ible in Floride, enter alternate corporate no	me adopted for the purpose of transacting business in	Florida)
Montana	tore in Florida, enter anemate corporate na	46.3360273	ribiluaj
(State or country	under the law of which it is incorporated) or 13, 2007	(FEI number, if applicable) Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "per	petual")
	(SEE SECTIONS 607.1501 & 60		
	gler Dr. STE 300 West (Principal office a	address)	
	gler Dr. STE 300 West	alm Beach, FL 33401	
	gler Dr. STE 300 West (Principal office of the state of	alm Beach, FL 33401	
515 N Fla	gler Dr. STE 300 West (Principal office of the station) (Principal office of the station) (Principal office of the station)	alm Beach, FL 33401	13 AUG 1
515 N Fla	gler Dr. STE 300 West (Principal office of the station) (Principal office of the station) (Principal office of the station)	r country to be carried out in state of Florida)	13 AUG 12
515 N Fla	gler Dr. STE 300 West (Principal office of the state of	r country to be carried out in state of Florida)	
Transport (Purpose(s) Name and street	gler Dr. STE 300 West (Principal office and principal office and princi	r country to be carried out in state of Florida) (P.O. Box NOT acceptable)	
Transpor	gler Dr. STE 300 West (Principal office of the state of	r country to be carried out in state of Florida) (P.O. Box NOT acceptable)	13 AUG 12 AM 11: 03

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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: __ Vice Chairman: Director: Address: _ **B. OFFICERS** President: Stephanie Ha Address: 495 Middleton Place Grayson, GA 30017 Vice President: Richard Stuckey Address: 442 NW 81st Street Miami, FL 33150 Secretary: Paul Carruth Address: 515 North Flagler Dr. STE 300 West Palm Beach, FL 33401 Treasurer: Don Nguyen Address: 1505 Willow Trace Dr. APT E Florence, SC 29501 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. 14 Paul Carruth

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SECRETARY OF STATE STATE OF MONTANA

CERTIFICATE OF EXISTENCE

I, Linda McCulloch, Secretary of State of the State of Montana, do hereby certify that

TIME ON TARGET, INC.

duly filed its Articles of Incorporation in this office on 13 November 2007, and on that date was created a body politic and corporate.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 2 August 2013.

jorde McCullan

LINDA MCCULLOCH Secretary of State

Certified File Number: D177069

Consider of Confusion