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FALL AHASSEE, FLORIO

10/28/13



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ACCOUNT NO. : I2000000195
REFERENCE : 853327 7416679
AUTHORIZATION :
COST LIMIT : \$ 70.00
ORDER DATE: October 21, 2013
ORDER TIME : 4:36 PM
ORDER NO. : 853327-001
CUSTOMER NO: 7416679
FOREIGN FILINGS
•
NAME: SAFEGUARD DOCUMENT DESTRUCTION INC.
TIVE.
XXXX QUALIFICATION (TYPE: <u>CO</u> )
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

## 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	able in Florida, enter alternate corporate no	ame	adopted for the purpose of transacting business in Florida)	
Delaware				
(State or country	under the law of which it is incorporated)		04-3784/34 (FEI number, if applicable)	
01/21/2004		5.	PERPETUAL	
(Date of incorporation)		~ J.	(Duration: Year corp. will cease to exist or "perpetual")	
•				
	(SEE SECTIONS 607.1501 & 60	07.15	r Florida, if prior to registration) 502, F.S., to determine penalty liability)	
6278 North Fed	eral Highway, Suite 559, Fort Lauderd	lale,	FL, 33308	
	(Principal office	addi	ress)	
			•	
	(Current mailing	, addı	ress)	
Document Des	struction ·			
	struction ) of corporation authorized in home state of	or co	untry to be carried out in state of Florida)	•
(Purpose(s			· ,	
(Purpose(s	) of corporation authorized in home state of		· ,	130
(Purpose(s	of corporation authorized in home state of staddress of Florida registered agent:  Corporation Service Company		· ,	13 OCT
(Purpose(s Name and stres Name:	) of corporation authorized in home state of address of Florida registered agent:		· ,	13 OCT 25
(Purpose(s Name and stres Name:	of corporation authorized in home state of staddress of Florida registered agent:  Corporation Service Company		D. Box NOT acceptable)  ALCAHASS	13 OCT 25 A
(Purpose(s	of corporation authorized in home state of address of Florida registered agent:  Corporation Service Company  1201 Hays Street		D. Box NOT acceptable)  ALCAHASS	孟
(Purpose(s Name and <u>stree</u> Name: Mice Address:	of corporation authorized in home state of address of Florida registered agent:  Corporation Service Company  1201 Hays Street  Tallahassee  (City)		D. Box NOT acceptable)  ALLAHASS	AH 8:
(Purpose(s Name and stree Name: Tice Address:	of corporation authorized in home state of address of Florida registered agent:  Corporation Service Company  1201 Hays Street  Tallahassee  (City)	(P.C	D. Box NOT acceptable)  ARRY OF STATE  ARRY OF STATE  (Zip code)  TARRY OF STATE  (Zip code)	AM 8: 2
(Purpose(s) Name and stres Name: fice Address:  Registered assignated in this	c) of corporation authorized in home state of address of Florida registered agent:  Corporation Service Company  1201 Hays Street  Tallahassee  (City)  gent's acceptance: and as registered agent and to accept a application, I hereby accept the application, I hereby accept the application.	(P.C	D. Box NOT acceptable)  ALCAHASS	AH 8: 25

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 Scoretary 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: FRANK VITAREILI	
Address: 6278 N. Federal Hy # 559 Filmuderdane Fl	33308
/ice Chairman:	
Address:	
Director:	,
Address:	
Director:	Tion 1
Address:	100 g
3, OFFICERS	ASSE
resident: Frank Vitarelli FRANK // TROF/	E OF ST
6278 North Federal Highway, Suite 559, Fort Lauderdale, FL, 33308	: 25 IATE ORIDA
rice President:	
Address:	
ecretary:	
Address:	······································
reasurer:	
NOTE: Mecessary, you may attach an addendum to the application listing additional officers and 3.	d/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 true and that he or she is aware that false information submitted in a document to the Department third degree felony as provided for in s.817.155, F.S.	
(Typed or printed name and capacity of person signing application)	

## Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SAFEGUARD DOCUMENT DESTRUCTION 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 TWENTY-FIRST DAY

OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAFEGUARD DOCUMENT DESTRUCTION INC" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2004.

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

13 OCT 25 AM 8: 25
SLUNK FARY OF STATE
FALL AHASSEE FLORING

3755043 8300

131215915

jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 0828125

DATE: 10-21-13

You may verify this certificate online at corp.delaware.gov/authver.shtml