

F1300000 5245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

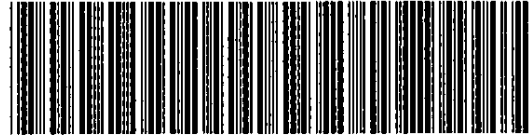
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400253550134

11/18/13--01024--015 **70.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 DEC -6 PM 1:38

N1364083

Signature
12-9-13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2013

PINNACLE LICENSING SOLUTIONS, INC.
C/O JEFF WOOD
103 N. GOLIAD, SUITE 204
ROCKWALL, TX 75087

SUBJECT: GLOBAL RECOVERY SOLUTIONS, INC.
Ref. Number: 400253550134

We have received your document for GLOBAL RECOVERY SOLUTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 713A00026783



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2013

PINNACLE LICENSING SOLUTIONS, INC.
C/O JEFF WOOD
103 N. GOLIAD, SUITE 204
ROCKWALL, TX 75087

SUBJECT: GLOBAL RECOVERY SOLUTIONS, INC.
Ref. Number: 400253550134

RECEIVED
13 DEC -6 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 713A00026783



December 2, 2013

New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

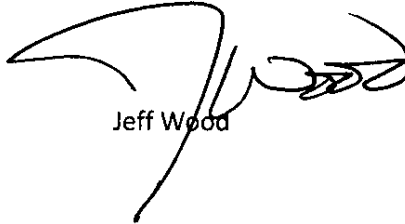
RE: application of Global Recovery Solutions, Inc. for a certificate of authority

To whom it may concern –

Enclosed please find the application of the above referenced company for a certificate of authority to do business in Florida. You will also find a check in the required amount and any other documents that are required to be submitted with this application. Please send any filed documents or certificates or questions to the undersigned at:

Pinnacle Licensing Solutions, Inc.
103 N. Goliad, Suite 204
Rockwall, TX 75087

Sincerely yours,


Jeff Wood

Enclosures

RECEIVED
13 DEC -6 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Global Recovery 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. Wyoming

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

3. 45-4080470

(FEI number, if applicable)

4. 04/24/2013

(Date of incorporation)

5. perpetual

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

X Oct 15, 2013

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4802 East Bay Road #23-407 Phoenix, AZ 85044

(Principal office address)

4802 East Bay Road #23-407 Phoenix, AZ 85044

(Current mailing address)

First

8. party debt collections and debt buying

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.



(Registered agent's signature)

Maria Ozaeta
Vice President

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John W. Reif

Address: 4802 East Ray Road #23-407 Phoenix, AZ 85044

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

X 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 W. Reif, President

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

I, MAX MAXFIELD, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuances of this certificate have been fulfilled.

CERTIFICATE OF GOOD STANDING

OF

Global Recovery Solutions LLC a Wyoming Limited Liability Company

To

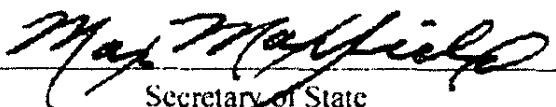
Global Recovery Solutions Inc. a Wyoming Profit Corporation

on April 24, 2013

I FURTHER CERTIFY that this company has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the company in existence in the State of Wyoming.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this Wednesday, September 25, 2013.




Secretary of State

By: Rosalie Gonzales