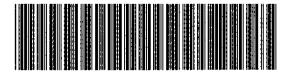
# F14000000073

| (Requestor's Name)                      |
|---|
| (Address)                               |
|   |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Business Enuty Name)                   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only



100254912411

01/03/14--01017--011 \*\*1170.00

14 JAN -3 PH 3: 09

× 01/06/14



Emily A. Jones

DIRECT 256.512.0108

EMAIL Egonoscomaynardcooper.com

Art 10: 58

December 30, 2013

#### VIA FEDERAL EXPRESS

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: Ultratec Special Effects (HSV) Inc. - Application by Foreign Corporation for Authorization to Transact Business in Florida

To Whom It May Concern:

Enclosed, please find the following:

- 1. Application by Foreign Corporation for Authorization to Transact Business in Florida submitted by Ultratec Special Effects (HSV) Inc.;
- 2. Alabama Certificate of Existence, dated December 2, 2013 for Ultratec Special Effects (HSV) Inc.; and
- 3. Check No. 006829 in the amount of \$1,170.00, representing the \$500 late-registration penalty, \$600.00 annual report filing fees (\$150.00 per year for four (4) years), and \$70.00 Filing Fee for Application.

Please do not hesitate to contact me, should you have any questions or need any additional information.

Very truly yours,

conspernes

Emily A. Jones

**Enclosures** 

cc: Ultratec Special Effects (HSV) Inc. (via email, with enclosures)

#### **COVER LETTER**

| TO: New Filing Section Division of Corpo  |  |   |  |
|---|--|---|--|
| SUBJECT. Ultrate  | c Special Effects                          | (HSV) Inc.  |  |
| SUBJECT.  |  | tion - must include suffix  |  |
| Dear Sir or Madam:  |  |   |  |
| "Certificate of Existence,"   |  | for Authorization to Transact standing" and check are submainess in Florida.    |  |
| Please return all correspon   | ndence concerning this ma                  | tter to the following:  |  |
| Marnie Styles   |  |   |  |
|   | Name                                       | of Person   | <del></del>  |
| <b>Ultratec Special</b>   | Effects (HSV) In                           | С.  |  |
|   | Firm/C                                     | Company   |  |
| 640 Gadson Str  | eet, Suite 100                             |   |  |
| Groveland, Florid   |  | ddress  |  |
| Marnie.Styles@ult   | •  | te and Zip code   |  |
|   |  | ed for future annual report no  | tification)  |
| For further information co  | oncerning this matter, pleas               | se call:  |  |
| Marnie Styles   | <sub>at (</sub> 519                        | <sub>)</sub> 951-3368   |  |
| Name of Person  | Ar   | 951-3368<br>ca Code & Daytime Telephor  | ne Number  |
| STREET/COUR<br>New Filing Section<br>Division of Corporation Building<br>2661 Executive Control Tallahassee, FL Control | on<br>orations<br>Center Circle            | MAILING AD<br>New Filing Sectorision of Cor<br>P.O. Box 6327<br>Tallahassee, FL | tion<br>porations  |
| Enclosed is a check for th  | e following amount:                        |   |  |
| ₹70.00 Filing Fee   | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy   | \$87.50 Filing Fee,<br>Certificate of Status &<br>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.

|   | orp," "Inc," "Co," or "Corp.")   |  |  |  |
|---|--|--|--|--|
| n/a   |  |  |  |  |
| (If name unavail  | able in Florida, enter alternate corporate   | name adopted for the purpose of transacting b  | ousiness in Florida)   | -  |
| <sub>2.</sub> Alabama   |  | 3  |  |  |
|   | under the law of which it is incorporate   | d) (FEI number, if applica   | nble)  | -  |
| 4. March 6, 20  | 07   | <sub>5.</sub> perpetual  |  |  |
| (Date   | of incorporation)  | (Duration: Year corp. will cease to ex   | cist or "perpetual")   | -  |
| 6. August, 200  | )9   |  |  | _  |
|   | (Date first transacted bus   | iness in Florida, if prior to registration)<br>607.1502, F.S., to determine penalty liability)   |  |  |
| <sub>7.</sub> 148 Moon  | Drive, Owens Cross Road  | ds, Alabama 35763  |  |  |
| /· <u></u>  | (Principal offi  |  | · · · · · · · · · · · · · · · · · · ·  | -  |
| 640 Gadso   | on Street, Suite 100, Gro  | oveland, Florida 34736   |  |  |
|   | (Current maili   |  |  | -  |
|   |  |  |  |  |
|   |  |  |  |  |
| <sub>8.</sub> Sales   |  |  |  |  |
|   | s) of corporation authorized in home state   | te or country to be carried out in state of Florid   | la)  | -  |
| (Purpose(s  | •  | •  | la)  | -  |
| (Purpose(s  | et address of Florida registered agent   | •  | ALL AR   | - (  |
| (Purpose(s  | •  | •  | ALL AR   | 1  |
| (Purpose(s  9. Name and street  Name:   | et address of Florida registered agent   | : (P.O. Box <u>NOT</u> acceptable)   | 14 JAN -3<br>SELECTION SEE<br>TALLAHASSE   | 1  |
| (Purpose(s  9. Name and street  Name:   | Marnie Styles 640 Gadson Street, Suite 100, Groveland, 1   | : (P.O. Box NOT acceptable)  Florida 34736   | 14 JAN -3 PH<br>SELECTORIASSEET  | Comments of the Comments of th |
| (Purpose(s  9. Name and street  Name:   | et address of Florida registered agent Marnie Styles   | : (P.O. Box <u>NOT</u> acceptable)   | 14 JAN -3<br>SELECTION SEE<br>TALLAHASSE   | Control of the Contro |
| (Purpose(s<br>9. Name and <u>street</u><br>Name:<br>Office Address:   | Marnie Styles 640 Gadson Street, Suite 100, Groveland, 9 Groveland (City)  | : (P.O. Box NOT acceptable)  Florida 34736   | 14 JAN -3 PH<br>SELECTORIASSEET  | Control of the Contro |
| (Purpose(s)  9. Name and street  Name:  Office Address:   | Marnie Styles 640 Gadson Street, Suite 100, Groveland, 3 Groveland (City) gent's acceptance:   | Florida 34736  , Florida 34736  (Zip code)   | 14 JAN -3 PM 3: 09 SELECTIONIO MALLANASSEE, FLORIDA                              |  |
| (Purpose(s)  9. Name and street Name: Office Address:  10. Registered as Having been name                                     | Marnie Styles  640 Gadson Street, Suite 100, Groveland, Groveland  (City)  gent's acceptance:  seed as registered agent and to accept  | Florida 34736  , Florida 34736  (Zip code)  t service of process for the above stated co   | 14 JAN -3 PM 3: 09 VALUATIASSEED FI DAIDA  orporation at the                     | place  |
| (Purpose(s) 9. Name and street Name: Office Address: 10. Registered a: Having been name designated in this further agree to c | Marnie Styles  640 Gadson Street, Suite 100, Groveland, S  Groveland  (City)  gent's acceptance:  seed as registered agent and to accept application, I hereby accept the appointment of the provisions of all state | Florida 34736  Florida 34736  The process for the above stated compointment as registered agent and agree to the proper and complete points. | 74 JAN -3 PM 3: 09 FALL AHASSEED FI DAIDA  orporation at the locact in this capa | city.  |
| (Purpose(s) 9. Name and street Name: Office Address:  10. Registered a: Having been nam designated in this further agree to c | Marnie Styles  640 Gadson Street, Suite 100, Groveland, Groveland  (City)  gent's acceptance:  seed as registered agent and to acceptanglication, I hereby accept the application, I hereby accept the application.  | Florida 34736  Florida 34736  The process for the above stated compointment as registered agent and agree to the proper and complete points. | 74 JAN -3 PM 3: 09 FALL AHASSEED FI DAIDA  orporation at the locact in this capa | place  |
| (Purpose(s) 9. Name and street Name: Office Address:  10. Registered a: Having been nam designated in this further agree to c | Marnie Styles  640 Gadson Street, Suite 100, Groveland, S  Groveland  (City)  gent's acceptance:  seed as registered agent and to accept application, I hereby accept the appointment of the provisions of all state | Florida 34736  Florida 34736  The process for the above stated compointment as registered agent and agree to the proper and complete points. | 74 JAN -3 PM 3: 09 FALL AHASSEED FI DAIDA  orporation at the locact in this capa | place  |
| 9. Name and stree Name: Office Address:  10. Registered a: Having been nam designated in this further agree to c              | Marnie Styles  640 Gadson Street, Suite 100, Groveland, S  Groveland  (City)  gent's acceptance:  seed as registered agent and to accept application, I hereby accept the appointment of the provisions of all state | Florida 34736  Florida 34736  The process for the above stated compointment as registered agent and agree to the proper and complete points. | 74 JAN -3 PM 3: 09 FALL AHASSEED FI DAIDA  orporation at the locact in this capa | place  |

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: Adrian Segeren Address: 148 Moon Drive Owens Cross Roads, Alabama 35763 Vice Chairman: Address: Director: Address: \_\_ **B. OFFICERS** President: Adrian Segeren Address: 148 Moon Drive Owens Cross Roads, Alabama 35763 Vice President: Marnie Styles Address: 148 Moon Drive Owens Cross Roads, Alabama 35763 Secretary: Adrian Segeren Address: 148 Moon Drive, Owens Cross Roads, Alabama 35763 Treasurer: Address: 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 Marnie Styles, Vice President

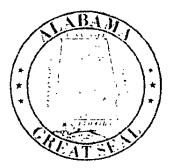
Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Ultratec Special Effects (HSV) Inc. was formed in Madison County, Alabama on March 6, 2007. The Alabama Entity Identification number for this entity is 251-533. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

14 JAN -3 FM 3: 09
SEURL FOR DE JERIED
FALLAHASSEE, FLORIO



20131202000001970

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

12/2/2013

Date

di sum

Jim Bennett

Secretary of State