Florida Department of State

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Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone : (800)221-2972 Fax Number : (888)692-9256

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

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April 18, 2014

FLORIDA DEPARTMENT OF STATE

BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

SUBJECT: REQUISITE ORGANIZATION INTERNATIONAL INSTITUTE/CASON HALL & CO.,

LTD.

REF: W14000024769

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

The use of "& or AND" with the term "CO. or COMPANY" removes the Corporate Suffix definition; reducing the terms(s) into everyday words.

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

Thomas Chang Regulatory Specialist II New Filing Section

FAX Aud. #: H14000090763 Letter Number: 714A00008353

APR 18 PM 3: 2"

APPLICATION BY POREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN VLOREIA

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.

inc., *Co.,* "C	orp,* "Ino," "Co," or "Corp."}	ed," 'Conipany," "Corporation," L Institute/Cason Hall & Co., Inc.		
•		and adopted for the purpose of transacting business in Florida)		
2. DELAVVA	RE	3. <u>54-1483921</u>		
(State or country 1 12/29/19)	ander the law of which it is incorporated)	(PCI number, if applicable) 5. PERCETUAL.		
6. APRIL 14	of incorparation) , 2014	(Duration: Year corp. will cease to exist or "perpetuai")		
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60	as in Floride, if prior to registration) 7.1502, F.S., to determine pensity liability)		
7. 3518 Ente	rprise Way, Sulte 5			
Green Co	(Principal office : ve Springs, FL 32043	address)		
	(Current malling	address)		
	g and Consulting		\$ 14 \$ 65 \$ 65 \$ 65 \$ 65 \$ 65 \$ 65 \$ 65 \$ 65	
(Purpose(s	of corporation authorized in home state o	or country to be carried out in state of Florida)	APR	~~
9. Name and street	t address of Florida registered agent: ((P.O. Box NOT acceptable)	3 -	-
Name:	BLUMBERGEXCELSIOR CORPORATE SERVICE	177	Ω Ω	
Office Address:	155 Office Plaza Drive, 1	st Fl.		
	TALLAHASSEE	, Florida 32301		
	(City)	(Zip code)	æ	
Having been nam designated in this further agree to co	application, I hereby accept the appoin	ervice of process for the above stated corporation at the interior as registered agent and agree to act in this capa les relative to the proper and complete performance of m as of my position as registered agent.	city. I	
		Jose Mojica, Assistant Secretary		

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: Rebecca Cason			
Address: 3516 Enterprise Way, Suite 5			
Green Cove Springs, FL 32003			
Vice Chairman:			•
Address:			_
		· · ·	
Director:			-
			••
Address:	季編	114	-
	\$ 7 m		-
Director;	<u> </u>	\$	
Address:	7/0 11 8/3 mg		—[(数
	44.6	=	- <u>'</u>
B. OFFICERS		œ	
President: Rebecca Cason			
Address: 3516 Enterprise Way, Suite 5	· · · · · · · · · · · · · · · · · · ·		_
Green Cove Springs, FL 32003			_
Vice President:			_
Address:			_
Secretary:			_
Address:			
Treasurer:	· · · · · · · · · · · · · · · · · · ·		_
Address:	·		_
NOTE: If necessary, you may anoth an addendum to the application listing additional officers and/or d	irectors.		
13. A. Cush			_
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fac are true and that he or she is aware that false information submitted in a document to the Department of			-
a third degree felony as provided for in \$.817.155, F.S. Rebecca Cason-PRESIDENT			
(Typed or printed name and capacity of person signing application)			

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REQUISITE ORGANIZATION INTERNATIONAL INSTITUTE/CASON HALL & CO., LTD." 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 FIFTEENTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REQUISITE ORGANIZATION INTERNATIONAL INSTITUTE/CASON HALL & CO., LTD." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 1988.

TILEND

14 APR 18 AM 8: 18

SECRETARY OF STATE
FALLSHESSEE FLOOR

2182831 8300

140474633

DATE: 04-15-14

AUTHENT\CATION: 1294989

You may verify this certificate online