

F14000002549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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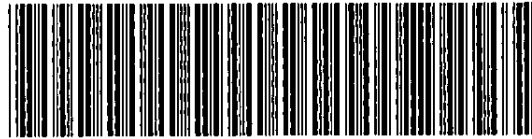
(Business Entity Name)

(Document Number)

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TO RECORDS
SUFFICIENCY OF FILING

2014 JUN 12 AM 10:49

FILED
14 JUN 12 AM 8:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

WA-36707



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2014

COROPRATION SERVICE COMPANY

RESUBMIT
Please give original
submission date as file date.

SUBJECT: HERTZ JACKSONVILLE ONE INVESTORS MANAGER, INC.
Ref. Number: W14000036707

We have received your document for HERTZ JACKSONVILLE ONE INVESTORS MANAGER, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 114A00012815

RECEIVED

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DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 170231 7550590

AUTHORIZATION :

COST LIMIT :

87.50

ORDER DATE : June 9, 2014

ORDER TIME : 8:50 AM

ORDER NO. : 170231-070

CUSTOMER NO: 7550590

FOREIGN FILINGS

NAME: HERTZ JACKSONVILLE ONE
MANAGER, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER: _____

14 JUN 12 AM 8:49
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. Hertz Jacksonville One Manager, 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. Delaware 3. Pending
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 9, 2014 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1522 2nd Street, Santa Monica, CA 90401
(Principal office address)

1522 2nd Street, Santa Monica, CA 90401
(Current mailing address)

8. Real estate ownership and operation
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (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.*

Corporation Service Company

By: Emily Gray Asst VP
(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.

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TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Judah Hertz

Address: 1522 2nd Street
Santa Monica, CA 90401

Vice Chairman: _____

Address: _____

Director: Gary S. Horwitz

Address: 1522 2nd Street
Santa Monica, CA 90401

Director: John D. Forbess

Address: 1522 2nd Street
Santa Monica, CA 90401

B. OFFICERS

President: Judah Hertz

Address: 1522 2nd Street
Santa Monica, CA 90401

Vice President: John D. Forbess

Address: 1522 2nd Street
Santa Monica, CA 90401

Secretary: John D. Forbess

Address: Santa Monica, CA 90401

Treasurer: Gary S. Horwitz

Address: Santa Monica, CA 90401

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

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 D. Forbess, Vice President/Secretary

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HERTZ JACKSONVILLE ONE MANAGER, 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 TENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HERTZ JACKSONVILLE ONE MANAGER, INC." WAS INCORPORATED ON THE NINTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

14 JUN 12 AM 8:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5548055 8300

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1439208

DATE: 06-10-14