F/4000003020

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	. 10.100.000
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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FILE B

07/16/14

Orion State Licensing, Inc.

VIA OVERNIGHT DELIVERY

June 21, 2014

Florida Department of State New Filing Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

Re: Weinstein, Karp & Associates, Inc.

FL Application for Authorization to transact business in Florida

Dear Sir or Madam,

Please find enclosed:

1) Above-referenced application 1 Original

2) Check made payable to: Florida Department of State; No Credit Cards

\$ 70.00

- 2a) Fee for Regular processing -
- (5-7 Bus. Days) check # 1004
- 3) Home state Certificate of Good Standing Dated within 90 days
- 4) If applicable, minutes of Special Meeting / Corporate Resolution using alternate name in Florida NA

If you have any questions, please contact the undersigned.

Very truly yours,

Orion State Licensing, Inc.

Janet Lopez, CEO

Please return the document to Orion State Licensing at 155 N. Riverview Drive, Anaheim, CA 92808.

COVER LETTER

TO: New Filing Section Division of Corporation			
\A/C1N1C	STEIN, KARP &	ASSOCIATES	INC
SUBJECT: VVEINS		n - must include suffix	
	, , , , , , , , , , , , , , , , , , ,		
Dear Sir or Madam:			
"Certificate of Existence."	by Foreign Corporation fo or "Certificate of Good State orporation to transact busing	inding" and check are sub-	
Please return all correspon	dence concerning this matte	er to the following:	
JANET J. LOPE	ΞZ		Α,
	Name of	Person	
ORION STATE	LICENSING, IN	C.	
	Firm/Co	npany	
155 N. RIVERV	IEW DRIVE		
	Add	ress	
ANAHEIM, CA	92808		
	City/State	and Zip code	
davidcollection20	002@gmail.com		
	E-mail address: (to be used	for future annual report n	otification)
For further information co	ncerning this matter, please	call:	
Janet J. Lopez	888	315-0805	
Name of Person		Code & Daytime Telepho	one Number
		•	٠.
		•	
STREET/COURT		MAILING A	
New Filing Section Division of Corpo		New Filing Sc Division of Co	
Clifton Building		P.O. Box 6327	
2661 Executive Co		Tallahassee, F	L 32314
Tallahassee, FL 3	2301		
Enclosed is a check for the	e following amount:		
■ \$70.00 Filing Fee ■	J \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & 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.

WEINST	EIN, KARP & ASSOCIATE	ES, INC.	
	orporation; must include "INCORPORATED," orp," "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATIO	N."
			•
/H rame unavaila	ble in Florida, enter alternate corporate name	adonted for the numose of transacti	ng husiness in Florida)
, California	·	46-5260818	ng edomess in t kertekry
. .	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
03/26/20			• /
т	of incorporation)	(Duration: Year corp. will cease t	o exist or "perpetual")
Upon App	oroval		
/·		Florida, if prior to registration)	11
1737 E \A	see sections 607.1501 & 607.15 ashington Blvd., #5, Pasa/	, -	my)
, 1101 L. VI	(Principal office add		
1737 E. W	ashington Blvd., #5, Pasade		
	(Current mailing add	· · · · · · · · · · · · · · · · · · ·	
			圣编 孝
8. Name and stree	<u>t address</u> of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	(db
Name:	InCorp Services, Inc.		
Office Address:	17888 67th Court North		5 M
	Loxahatchee	Florida 33470	MIII: 2;
	(City)	(Zip code)	27 A
). Registered age	•	,	7

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.

See Attached	
(Registered agent's signature)	

10. 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.



2360 Corporate Circle, Suite 400 Henderson, NV 89074

Phone 702.866.2500 Toll-Free 800.2.INCORP (1-800-246-2677) Fax 702.866.2689

www.incorp.com

June 26, 2014

Corporations Division

Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To Whom It May Concern:

Incorp Services, Inc., an authorized Corporate Registered Agent in Florida, whose office is located at 17888 67th Court North, Loxahatchee, FL 33470, herein consents to act as Registered Agent for **Weinstein**, **Karp & Associates**, **Inc.** for purposes and services only related to the Florida Department of State.

If you have any questions, please contact me at (800) 246-2677 from 8:00 a.m. to 5:00 p.m. PST.

Sincerely,

INCORP SERVICES, INC.

Heather Nee, Processor on behalf of Incorp Services, Inc.

FILED

14 JUL 15 MIN: 27

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

A. DIRECTORS Chairman: David Karp	
Address: 1737 E. Washington Blvd., #5, Pasaden	a, CA 91104
Via Chairman	
Vice Chairman:	
Address:	
Director:	
Address:	
Director;	X
Address:	
President: David Karp Address: 1737 E. Washington Blvd., #5, Pasaden	E C
Vice President:	A PART A TOUR AND A PART A PAR
Address:	## 5 F
Secretary: David Karp	REE 2
Address: 1737 E. Washington Blvd., #5, Pasader	na, CA 91104
Treasurer: David Karp	
Address: 1737 E. Washington Blvd., #5, Pasader	ia, CA 91104
NOTE: If necessary, you may attach an addendum to the application I	
Signature of Director or Of The officer or director signing this document (and who is listed in num are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, 1.5.	ber 12 above) affirms that the facts stated herein
David Karp, President	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

WEINSTEIN, KARP & ASSOCIATES, INC.

FILE NUMBER:

C3660107

FORMATION DATE:

03/26/2014

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

FILED

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I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 11, 2014.

DEBRA BOWEN
Secretary of State