

F14000004858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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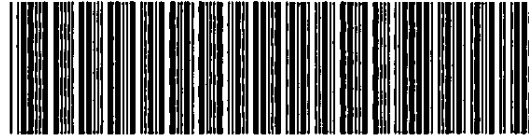
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/10/14--01005--022 **70.00

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TALLAHASSEE, FLORIDA

11-18/ms

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Analysis Modeling and Programming Sciences, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Niccolai Murphy

Name of Person

Analysis Modeling and Programming Sciences, Inc.

Firm/Company

13935 Bernadotte Lane

Address

Poway, CA 92064

City/State and Zip code

niccolai@amps4analysis.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Niccolai Murphy

Name of Person

at (858) 705-3892

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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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. **Analysis Modeling and Programming Sciences, 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. **CA** 3. **33-0869555**

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

(FEI number, if applicable)

4. **8-17-1999**

5. **perpetual**

(Date of incorporation)

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

6. **9-15-2013**

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

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

7. **13935 Bernadotte Lane, Poway, CA 92064**

(Principal office address)

13935 Bernadotte Lane, Poway, CA 92064

(Current mailing address)

8. **Employment of individuals to perform engineering services**

(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:

Alan Lee

Office Address:

2085 Hwy A1A, Suite 3304

Indian Harbour Beach

(City)

Florida

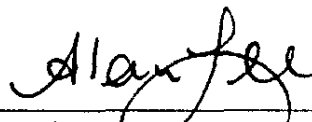
32937

(Zip code)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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)

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: Niccolai Murphy

Address: 13935 Bernadotte Lane
Poway, CA 92064

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Niccolai Murphy

Address: 13935 Bernadotte Lane
Poway, CA 92064

Vice President: _____

Address: _____

Secretary: Niccolai Murphy

Address: 13935 Bernadotte Lane, Poway, CA 92064

Treasurer: Niccolai Murphy

Address: 13935 Bernadotte Lane, Poway, CA 92064

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. Niccolai Murphy, President

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

FILED
14 NOV 18 AM 8:51
DEPT. OF STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ANALYSIS MODELING AND PROGRAMMING SCIENCES, INC.

FILE NUMBER: C2046248
FORMATION DATE: 08/17/1999
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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 November 08, 2014.

Debra Bowen

DEBRA BOWEN
Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2014

NICCOLAI MURPHY
ANALYSIS MODELING AND PROGRAMMING SCIENC
13935 BERNADOTTE LANE
POWAY, CA 92064

SUBJECT: ANALYSIS MODELING AND PROGRAMMING SCIENCES, INC.
Ref. Number: W14000062311

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.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 714A00021842