## F15000000301

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

Office Use Only



700268700257

15 JAN 26 PH 1: 48

FILED
SECRETARY OF STAIL
OIVISION OF CORPORALIONS

01/27/15

ACCOUNT NO. : I20000000195 REFERENCE: 463604 7916303 AUTHORIZATION : ( COST LIMIT : \$ 70.00 ORDER DATE: January 16, 2015 ORDER TIME : 12:58 PM ORDER NO. : 463604-010 CUSTOMER NO: 7916303 FOREIGN FILINGS NAME: HPA, INC. XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Courtney Williams -- EXT# 62935 EXAMINER:

## 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. (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) California (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 18831 BARDEEN AVE, SUITE 100 IRVINE, CA 92612 (Principal office address) 18831 BARDEEN AVE, SUITE 100 IRVINE, CA 92612 (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee \_, Florida (City) (Zip code) 9. 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 Courtney Williams Asst. Vice President By: (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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Dennis HIII Director: 18831 Bardeen Ave, Suite 100, Irvine, CA 92612 **B. OFFICERS** President: 18831 BARDEEN AVE, SUITE 100 IRVINE, CA 92612 Vice President: ROBERT JACOB Secretary: 18831 BARDEEN AVE, SUITE 100 IRVINE, CA 92612 Address: SUSAN LITTLEFIELD Treasurer: 18831 BARDEEN AVE, SUITE 100 IRVINE, CA 92612 NOTE: If necessary, 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. \$1.7.155.75.

13. SUSAN LITTLEFIELD, CFO

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

## State of California

## Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

H P A , INC.

FILE NUMBER: FORMATION DATE:

hereby certify:

C1052249 08/18/1981

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA SUSPENDED

STATUS:

The records of this office indicate the California Franchise Tax Board suspended the entity's powers, rights and privileges on September 01, 1988, pursuant to the provisions of the California Revenue and Taxation Code, and the entity's powers, rights and privileges remain suspended.

I, ALEX PADILLA, Secretary of State of the State of California,



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 16, 2015.

> ALEX PADILLA Secretary of State