Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000103577 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION

Account Number : FCA000000023

: (850)878-5368 Fax Number

Phone : (850) 205-8842

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

Email	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION

C.T.M. Services America, Inc.

Certificate of Status	0
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Page Count	95 6
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

4/29/2015 4:26:18 PM From: To: 8506176381(2/6)

April 29, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations

Phone raisin organi ili

C T CORPORATION SYSTEM

SUBJECT: C.T.M. SERVICES AMERICA, INC.

REF: W15000D30214

date of submission dag

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.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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

Maryanne Dickey Regulatory Specialist II New Filing Section FAX Aud. #: H15000103577 Letter Number: 615A00008748

<u>+-</u>

COVER LETTER

TO: New Filing Section Division of Corporations								
SUBJECT: C.T.M. Services America, Inc.								
Name of corporation - must include suffix								
Dear Sir or Madam:	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: Jeff Pope								
	Nam	e of P	:1500					
C.T. Developm	ent America, I	nc						
		Comp	any					
430 Mountain /	Avenue							
		Addres	3					
Murray Hill, NJ	07974							
	• •	ate and	l Zip code					
jeff.pope@auver	NEX.COM E-mail address: (to be u	45.42 E.S.	- Armen annual annuar t	at Earling V				
For further information co				<i>iourcusony</i>				
Jeff Pope	_{et (} 90	8	, 546-6105					
Name of Person	Jeff Pope et (908) 546-6105 Name of Person 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 Tallahassec, 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	S87.50 Filing Pee, 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. C.T.M. Services America, 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) 26-1772441 Delaware (State or country under the law of which it is incorporated (FEI number, if applicable) 01/17/2008 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 04/01/2015 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Cypress Plaza, 6365 N.W. 6th Way, Suite 220, Ft. Lauderdale, FL 33309 (Principal office address) 430 Mountain Avenue, Murray Hill, NJ 07974 (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: <u>C T CORPORATION SYSTEM</u> 1200 South Pine Island Road Office Address: <u>Plantation</u> 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. MARGARET E. ROUTZAHN

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.

Special Assistant Secretary

	**
11. Names and business addresses of officers and/or directors:	13 AR
A. DIRECTORS	S. 8
Chelmen:	
Address:	<i>36</i> 9
	· · · · · · · · · · · · · · · · · · ·
Vice Chairman:	The Control of the Co
Address:	
Director: Peter B. Corr	
Address: 18-8 Estate Smith Bay, St. Thomas, 'U.S.V.I 00802	
Director: Stephen Evans-Freke	,
Address: 18-8 Estate Smith Bay, St. Thomas U.S.V.I. 00802	
B. OFFICERS	
President: Peter B. Con	
Address: 18-8 Estate Smith Bay, St. Thomas U.S.V.I 00802	
Vice President: Stephen Evans-Freke	
Address: 18-8 Estate Smith Bay. St. Thomas U.S.V.I. 00802	
Secretary:	
Address:	
Tressum. Stuart Barlow	
Address: 430 Mountain Avenue, Murray Hill, NJ 07974	· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an adjunctum to the application listing additional officers a	and/or directors.
12	
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 Departmanth degree felony as provided for in s.817.155, F.S.	near of State constitutes
13. Stuart Barlow - Chief Accounting Officer & Group Treasurer	

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

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "C.T.M. SERVICES AMERICA, 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 SEVENTHENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "C.T.M. SERVICES AMBRICA, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JANUARY, A.D. 2008.

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

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

150369873 You may worlfy this certificate online at corp. deleware.gow/authwer.shtml

DATE: 03-17-15