

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H15000220638 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)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

\*\*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/NO	ONPROFIT	CORPOR	ATION

Corporate Claims Management, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

09\$14/2015 10:36

H15000220638

## 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.

(If name unavail	able in Florida, enter alternate corporate n	ame adopt	ten for the p	m hose or disting	cous premess	in Flori	da)
Delaware		_ 3					
(State or country	under the law of which it is incorporated)	ı	(	FEI number, if a	wplicable)		
May 6, 2015		_ 5	perpetual				
(Date	of incorporation)	(Du	ration: Yes	r corp. will ceas	e to exist or "	perpetua	l'')
	(r :	: UCICITE X R I					
401 E. Las Ol	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing						
3rd Party Clai	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing m Administrator	lale, FL 33 g address)		ed out in state of	Florida Y		
3rd Party Clai (Purpose(	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing n Administrator ) of corporation authorized in home state	ale, FL 33 g address)	y to be carrie		Floriday	2015	
3rd Party Clai (Purpose(	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing m Administrator	ale, FL 33 g address)	y to be carrie		E.W.	2015 SEP	
3rd Party Clai (Purpose(	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing n Administrator ) of corporation authorized in home state	ale, FL 33 g address)	y to be carrie		CREA	2015 SEP 1	
3rd Party Clai (Purpose( Name and stre Name:	ns Boulevard, Suite 1650 Fort Lauderd (Current mailing n Administrator ) of corporation authorized in home state et address of Florida registered agent:	ale, FL 33 g address) or country (P.O. Bo	y to be carrie		CRETARY LAHASSE	SEP II P	
3rd Party Clai (Purpose( Name and stre	n Administrator  of corporation authorized in home state et address of Florida registered agent:  Corporate Creations Network Inc.  11380 Prosperity Farms Road #221	ale, FL 33 g address) or country (P.O. Bo	y to be carrie	ceptable)	CREA	SEP II	

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.

09/14/2015 10:36 5612968430

## H15000220638

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

A. DIRECTO	RS		
Chairman:	Steven M. Mariano		
Address:	782 Spirit 40 Park	/	
	Chesterfield MO 63005	<u> </u>	
Vice Chairman:	Timothy Ermatinger		
Address:	782 Spirit 40 Park		
	Chesterfield MO 63005		
Director:	Christopher Pizzo		
Address:	782 Spirit 40 Park		
	Chesterfield MO 63005		
Director:		<u> </u>	
Address:			2015 2015 2015 2015
			the the
B. OFFICERS	ī		ARY SSE
President: Mi	chael D. Greco		The D
	2 Spirit 40 Park		2: 2 ORIL
	esterfield MO 63005		> 0s
	Lisa Balmer		
Address:78	2 Spirit 40 Park		
	nesterfield MO 63005		
	th Crews		
,	2 Spirit 40 Park. Chesterfield MO 63005		
Treasurer:El	/Is Rivera		
Address:78	2 Spirit 40 Park . Chesterfield MO 63005		
NOTE: If nece	ASSETY, you may attach an addendum to the application of the applicati	-	
14 Michael	V	/ Taylor Page as Attom	

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

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAMARE, DO HEREBY CERTIFY "CORPORATE CLAIMS MANAGEMENT, 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 SEPTEMBER, A.D.
2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CORPORATE CLAIMS MANAGEMENT, INC." WAS INCORPORATED ON THE SIXTH DAY OF MAY, A.D. 2015.

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

5741885 8300

SR# 20150083156

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

Marry W. Marrier, Sourcery of Blat.

Authentication: 10029884

Date: 09-10-15