

F1500004245

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

****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

M CORP d/b/a ~~CA-M-CORP~~ M Corp Solutions

Certificate of Status	0
Certified Copy	1
Page Count	056
Estimated Charge	\$78.75

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Corporate Filing Menu

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SEP 25 2015

3 MASON

9/25/2015 9:11:31 AM From: To: 8506176383(2/6)
850-817-8381 9/24/2015 9:10:12 AM PAGE 1/001 Fax Server



September 24, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MARIA MONSANTO
VIA FAX

SUBJECT: CA M CORP
REF: W15000063481

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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L05000110876 CAM LLC.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason
Regulatory Specialist II

FAX Aud. #: H15000229020
Letter Number: 615A00020138

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE-SUBMIT

9/23

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M Corp

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:

Maria Monsanto - Controller

Name of Person

M Corp

Firm/Company

1100 - 11th Street, 5th Floor

Address

Sacramento, CA 95814

City/State and Zip code

support@the-mcorp.com

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

For further information concerning this matter, please call:

Maria Monsanto

at (916)

254-0355

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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

**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. M Corp
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

M Corp Solutions
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. California, USA 3. 20-0810267
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/22/2004 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1100 - 11th Street, 5th Floor, Sacramento, CA 95814
(Principal office address)

1100 - 11th Street, 5th Floor, Sacramento, CA 95814
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road
Plantation, FL 33324, Florida 33324
(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.

C T Corporation System

By: _____
(Registered agent's signature)

Jonh Vincent

Jonh Vincent
Vice President & Assistant Secretary

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: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Alejandro A. Castro

Address: 1100 - 11th Street, 5th Floor, Sacramento, CA 95814

Vice President: Charles A. Czajkowski

Address: 1100 - 11th Street, 5th Floor, Sacramento, CA 95814

Secretary: Hung Y. Lee

Address: 1100 - 11th Street, 5th Floor, Sacramento, CA 95814

Treasurer: Charles A. Czajkowski

Address: 1100 - 11th Street, 5th Floor, Sacramento, CA 95814

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Alejandro A. Castro - CEO

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

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

M CORP

FILE NUMBER: C2642826
FORMATION DATE: 03/22/2004
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, **ALEX PADILLA**, 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 September 21, 2015.

ALEX PADILLA
Secretary of State