2/3/2015 10:22:55 M Fre Division of Corporation M From: 383(1/6) 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. (((H15000285944 3))) H1 50002859443ABC5 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 AM 9: From: Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023 ா Phone : (850)205-8842 : (850)878-5368 Fax Number **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 AMERICA'S BACK OFFICE, INC - U.S. Certificate of Status 0 AM 10: RECEIVEI Certified Copy 0 <u>06</u> Page Count K. SALY EXAMINER DEC - 4 2015 \$70.00 Estimated Charge DEC ഹ

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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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.	AMERICA'S BACK OFFICE, INC - U.S.					
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")					
	(If name unavailable in Florida, enter alternate cor	porate name	adop	ted for the purpose of transacti	ng business in Florida)	
2.	Michigan	3.	47-	\$036725		
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)		
4.	08/31/2015	5.	Рег	petual		
	(Date of incorporation)			(Date of duration, if other than perpetual)		
6.	Upon Qualification					
	(Date first transacto			rida, if prior to registration) F.S., to determine penalty liabi	14.)	
	-		502,1	.s., to determine penalty had	nty)	
7.	13900 Lakeside Circle Suite 200, Sterling Heights,		nal of	fice address)		
		(i imei	Par or			
	same	Current maili	ne ad	dress, if different)		
		Juli Vill Marri				
8.	Name and street address of Florida registered	agent: (P.	O. Bo	ox <u>NOT</u> acceptable)	2015 DEC	
	Name: <u>C T Corporation System</u>			_		
O	ffice Address: <u>1200 South Pine Island Road</u>				5.2. 5	
	Plantation			Florida 33324		
	(City)	<u> </u>		(Zip code)	9	

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 S April Wittenwyler Assistant Secretary (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.

12/3/2015 10:22:55 AM From: To: 8506176383(3/6)

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	FILED 2015 DEC-3 AM 9:57 TALLANDA MILLE	
11. Names and business addresses of officers and/or directors:	2015 000	
A. DIRECTORS SEE ATTACHMENT	and AN One	
Chairman:	TALLAR STAR	
Address:	TALLARIASSE UP STAT	
	······	
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President: David Otto		
Address: 13900 Lakeside Circle Suite 200	······································	
Sterling Heights, MI 48313		
Vice President:		
Address:		
Secretary:		
Address:		
Ггеазигег:	_	
Address:		
NOTE: If necessary, you may attach an addendum to the application listing	and ditional officers and/or directors	
A ALL	g auditional officers and/or directors.	
12. Duvi (100) Signature of Director or Officer	······	

13. David Otto, President

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

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Attachment to Florida Officers & Directors

1 Full Name:

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j.

Officer/Director: Officer's Title: Director's Title: Business Address: City: State: ZIP Code:

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David Otto Officer,Director President Director 13900 Lakeside Circle Suite 200 Sterling Heights MI 48313

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Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

AMERICA'S BACK OFFICE, INC - U.S.

was validly incorporated on August 31, 2015, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is Issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 24th day of September, 2015.

Alan J. Schefke, Director Corporations, Securities & Commercial Licensing Bureau

GOLD SEAL APPEARS ONLY ON ORIGINAL