Page 1 of 2

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.

(((H16000006729 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:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

: (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 .

F.m.s	÷	1	Address:
स्थात	_	_	Variable.

FOREIGN PROFIT/NONPROFIT CORPORATION ADSERV INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70,00

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 11 2016

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.

(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3240 Professional Dr. Auburn CA 95602 (Principal office address) (Current mailing address, if different) Name: Robby H. Birnbaum Name: 100 W. Cypress Creek Road, Suite 700 Fort Lauderdale (City) (City) (PEI number, if applicable) PERPETUAL (Date of incorporation) (Pate of duration, if other than perpetual) (Pate of duration, if other than perpetual) (Pate of duration, if other than perpetual)	(If name unaval CALIFORNIA	_	47-548703	•	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3240 Professional Dr. Auburn CA 95602 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Robby H. Birnbaum 100 W. Cypress Creek Road, Suite 700 Fort Lauderdale Fort Lauderdale Florida Florida 33309	(State or count 10/30/2015	ry under the law of which it is incorporated) 5.	· (FEI number, if a	pplicabie)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3240 Professional Dr. Auburn CA 95602 (Principal office address) 3240 Professional Dr. Auburn CA 95602 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Robby H. Birnbaum 100 W. Cypress Creek Road, Suite 700 Fort Lauderdale Fort Lauderdale Fort Lauderdale Florida	(Dat	s of incorporation)	(Date of duration, if other than perpetual)		
Current mailing address, if different Current mailing address Cu	3240 Professions	(SEE SECTIONS 607.1501 & 607.15 J Dr. Auburn CA 95602	502, F.S., to determine penalty liabi	liv)	
(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Robby H. Birnbaum 100 W. Cypress Creek Road, Suite 700 Fort Lauderdale Fort Lauderdale Fort Lauderdale Fort Lauderdale Fort Lauderdale Fort Lauderdale	3240 Profession	• •	al office address)	2	
Name: Robby H. Birnbaum Company Company			ng address, if different)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ffice Address: 100 W. Cypress Creek Road, Suite 700		··· ··································	D. Box <u>NOT</u> acceptable)	ASSVI 8-N	
, Florida		100 W. Cypress Creek Road, Suite 700		,	
(City) (Zip code)			33309 , Florida		
		(City)	(Zip code)	المناقب	

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: _ Owen McCullough Director: 3240 Professional Dr. Auburn, CA 95602 Address: _ B. OFFICERS Owen McCullough President: __ 3240 Professional Dr. Auburn, CA 95602 Vice President: To assessing the light of the l Secretary: _ 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 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. Owen McCullough, President (Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ADSERV INC.

FILE NUMBER: FORMATION DATE: C3838573

10/30/2015

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California Ap 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 January 07, 2016.

> ALEX PADILLA Secretary of State