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(Address)

(Address)

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2016 APR 18 P 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 19 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2016

QUINN S. RUELLE
6018 CAJEPUT LANE
BONITA SPRINGS, FL 34134

SUBJECT: CERTIFIED ESUPPORT CORP
Ref. Number: W16000023174

We have received your document for CERTIFIED ESUPPORT CORP and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

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

Deborah Bruce
Regulatory Specialist II

Letter Number: 516A00006426

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TALLAHASSEE, FLORIDA

REC'D
2016 APR 19 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

CERTIFIED ESUPPORT, CORP

SUBJECT: _____

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:

QUINN S. RUELLE

Name of Person

CERTIFIED ESUPPORT, CORP

Firm/Company

6018 CAJEPUT LANE

Address

BONITA SPRINGS, FL 34134

City/State and Zip code

ryan@lwmarketing.com

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

For further information concerning this matter, please call:

MICHAEL RYAN

239

405-8250 ext 5308

at (_____) _____

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.*

CERTIFIED ESUPPORT, CORP

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

CESC CORP

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

TEXAS

81-0705801

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

11/24/15

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

01/01/2016

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

2305 DONLEY DRIVE SUITE 114 / AUSTIN, TX 78758-4535

7. _____
(Principal office address)
6018 CAJEPUT LANE / BONITA SPRINGS, FL 34134

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

QUINN S. RUELLE

Name: _____

6018 CAJEPUT LANE

Office Address: _____


BONITA SPRINGS

34134

_____, Florida _____
(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.



(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.

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2016 APR 18 P 1:17
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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: QUINN S. RUELLE
6018 CAJEPUT LANE
Address: BONITA SPRINGS, FL 34134

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. QUINN S. RUELLE

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

FILED
2018 APR 18 P 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Carlos H. Cascos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CERTIFIED ESUPPORT, CORP. (file number 802337562), a Domestic For-Profit Corporation, was filed in this office on November 24, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 15, 2016.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos
Secretary of State

Come visit us on the internet at <http://www.sos.state.tx.us/>

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Dial: 7-1-1 for Relay Services
Document: 666132430002