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H160001366523ABC/

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.

(((H16000136652 3)))



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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
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

Hertz Investors, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	08
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUN 06 2016

J. BRUCE

6/3/2016

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2016 JUN -3 P 10: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

2016 JUN -3 PM 4:33

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hertz Investors, Inc.

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:

Name of Person

Firm/Company

Address

City/State and Zip code

Jmcandle@hertz.com

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

For further information concerning this matter, please call:

Name of Person

at (_____) _____
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

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TALLAHASSEE, FLORIDA

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 20-3622783
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 08/31/2005 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8501 Williams Road, Estero, FL 33928
(Principal office address)

same
(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, 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.

By: Madonna Cuddihy
(Registered agent's signature)

**Madonna Cuddihy
Special 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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: John P Tague

Address: 999 Vanderbilt Beach Road

Naples, FL 34108

Vice President: Richard J. Frecker

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. William Langston

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. William Langston, Asst. Secretary

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

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TALLAHASSEE, FLORIDA

**Attachment to Florida
Officers & Directors**

- 1 **Full Name:** Nuns Moodliar
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:
 Business Address:
 City:
 State:
 ZIP Code:
- 2 **Full Name:** John M. Szot
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:
 Business Address:
 City:
 State:
 ZIP Code:
- 3 **Full Name:** Kelly Kirk Shryoc
 Officer/Director: Officer
 Officer's Title: Assistant Treasurer
 Director's Title:
 Business Address:
 City:
 State:
 ZIP Code:
- 4 **Full Name:** William Langston
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:
 Business Address:
 City:
 State:
 ZIP Code:
- 5 **Full Name:** Michael B. Holdgrafer

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	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
6	Full Name:	Thomas C. Kennedy
	Officer/Director:	Officer
	Officer's Title:	Vice President and Treasurer
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
7	Full Name:	Richard P. McEvily
	Officer/Director:	Officer
	Officer's Title:	Vice President, Deputy General Counsel
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
8	Full Name:	Thomas C. Kennedy
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	
	City:	
	State:	
	ZIP Code:	
9	Full Name:	John P Tague
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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6/3/2016 3:35:38 PM From: To: 8506176383(7/8)

Business Address:

City:

State:

ZIP Code:

999 Vanderbilt Beach Road

Naples

FL

34108

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HERTZ INVESTORS, 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 THIRD DAY OF JUNE, A.D. 2016.

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

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



4023825 8300

SR# 20164285352

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202428712

Date: 06-03-16