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O. BRUCE

COVER LETTER

TO: Registration S						
Division of Co VOIGHT	rporations INVESTMENT CO	RPORATIO	N			
SUBJECT:						_
	Name o	of corporation	on - mus	st include suffix		
Dear Sir or Madam:						
The enclosed "Applica "Certificate of Existendabove referenced foreign	ce," or "Certificate	of Good St	anding"	and check are sub	et Business in Florida," mitted to register the	
Please return all corres WILLIAM C. VOIGHT		ng this matt	er to the	e following:		
VOIGHT, P.A.		Name o	f Persoi	1		_
7680 UNIVERSAL BOU	JLEVARD, SUITE 1	Firm/Co	mpany			_
		Add	lress			_
ORLANDO, FL 32819					25 25	
WILLIAM@MYVOIGH	т.сом	City/State	and Zip	code		,-num
	E-mail address	: (to be used	l for fut	ure annual report n		-[]
For further information	concerning this m	atter, please	call:			المريدة
CHRISTINE M. BERK,		407	47	7-4559, EXT. 2006	5.00	
Name of Perso		at (Area Co) ode	Daytime Teleph	none Number	
STREET/COU Registration Set Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations g e Center Circle	S:		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	
Enclosed is a check for	the following amo	unt:				
■ \$70.00 Filing Fee	□ \$78.75 Filing Certificate o			75 Filing Fee & ified Copy	□ \$87.50 Filing Fee, Certificate of Statu Certified Copy	1S &

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. VOIGHT INVESTMENT CORPORATION 1. (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) MARYLAND 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) APRIL 21, 1953 (Date of incorporation) (Date of duration, if other than perpetual) N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7680 UNIVERSAL BOULEVARD, SUITE 100, ORLANDO, FL 32819 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) WILLIAM C. VOIGHT II Name: 7680 UNIVERSAL BOULEVARD, SUITE 100 Office Address: **ORLANDO** (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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS RALPH C. VOIGHT, SR. Chairman: 7680 UNIVERSAL BOULEVARD, SUITE 100 Address: ORLANDO, FL 32819 Vice Chairman: RALPH C. VOIGHT, JR. Director: 7680 UNIVERSAL BOULEVARD, SUITE 100 Address: ORLANDO, FL 32819 WILLIAM C. VOIGHT II Director: 7680 UNIVERSAL BOULEVARD, SUITE 100 Address: ORLANDO, FL 32819 **B. OFFICERS** RALPH C. VOIGHT, SR. President: 7680 UNIVERSAL BOULEVARD, SUITE 100 Address: ORLANDO, FL 32819 Vice President: Address: _ WILLIAM C. VOIGHT II Secretary: 7680 UNIVERSAL BOULEVARD, SUITE 100, ORLANDO, FL 32819 Address: RALPH C. VOIGHT II Treasurer: 768 UNIVERSAL BOULEVARD, SUITE 100, ORLANDO, FL 32819 Address: **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 affector 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. WILLIAM C. VOIGHT II, AS DIRECTOR AND SECRETARY 13. _

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

STATE OF MARYLAND Department of Assessments and Taxation

I. HEIDI DUDDERAR OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT VOIGHT INVESTMENT CORPORATION, INCORPORATED APRIL 21, 1953, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED. HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 07, 2016.

Heidi Dudderar Associate Director

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301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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