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(Requestor's Name)

(Address)

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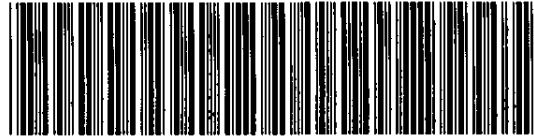
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/15/16--01011--002 \*\*70.00

07/11/16--01001--023 \*\*650.00

FILED  
16 JUL 11 AM 7:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

734 (650)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 16, 2016

CHLOE ASHCROFT  
123 MISSION ST SUITE 900  
SAN FRANCISCO, CA 94105

SUBJECT: NCC GROUP SECURITY SERVICES, INC  
Ref. Number: W16000043496

We have received your document for NCC GROUP SECURITY SERVICES, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Justin M Shivers  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 616A00012653

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NCC GROUP SECURITY SERVICES, 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:

CHLOE ASHCROFT

Name of Person

NCC GROUP

Firm/Company

123 MISSION STREET, SUITE 900, SAN FRANCISCO

Address

CA 94105

City/State and Zip code

chloe.ashcroft@nccgroup.trust

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

For further information concerning this matter, please call:

CHLOE ASHCROFT

at ( 415 ) 2689241

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

**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. NCC GROUP SECURITY SERVICES, 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. NEVADA 3. 20-8092047  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12.22.2006 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. JUNE 1ST 2015  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 123 MISSION STREET, SUITE 900, SAN FRANCISCO, CA 94105  
(Principal office address)

(Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

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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.*

CT Corporation System

By: Scott A. White Scott White  
(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**

Chairman: ROB COTTON  
Address: NCC GROUP, MANCHESTER TECHNOLOGY CENTRE, OXFORD ROAD, MANCHESTER, M1 7EF

Vice Chairman: ROGER RAWLINSON  
Address: NCC GROUP, MANCHESTER TECHNOLOGY CENTRE, OXFORD ROAD, MANCHESTER M1 7EF

Director: NICK ROWE  
Address: NCC GROUP, 123 MISSION STREET, SUITE 900, SAN FRANCISCO, CA 94105

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
16 JUL 11 AM 7:30

**B. OFFICERS**


President: ROB COTTON  
Address: NCC GROUP, MANCHESTER TECHNOLOGY CENTRE, OXFORD ROAD, MANCHESTER, M1 7EF

Vice President: DAVE GOLDSMITH  
Address: NCC GROUP, 123 MISSION STREET, SUITE 900, SAN FRANCISCO, CA 94105

Secretary: CHLOE ASHCROFT  
Address: NCC GROUP, 123 MISSION STREET, SUITE 900, SAN FRANCISCO, CA 94105

Treasurer: DARREN MALONEY  
Address: NCC GROUP, 123 MISSION STREET, SUITE 900, SAN FRANCISCO, CA 94105

**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. CHLOE ASHCROFT  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NCC GROUP SECURITY SERVICES, INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 22, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 2, 2016.

Handwritten signature of Barbara K. Cegavske in cursive script.

BARBARA K. CEGAVSKE  
Secretary of State



Electronic Certificate  
Certificate Number: C20160602-1824  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>