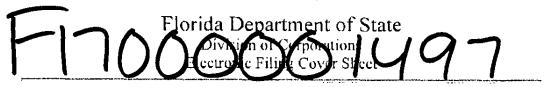
3/31/2017

Division of Corporations



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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

: (614)280-3338

Fax Number

Email Address:\_

: (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only onedemail address please.\*\*

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## FOREIGN PROFIT/NONPROFIT CORPORATION

## HES Advisors, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

## 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. HESAdvisors, Inc. (Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") O'Gara Associates, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Plorida, if prior to registration) (SFF SECTIONS 607 1501 & 607 1502, U.S., to determine penalty liability) 501 Andrews Avenue Delray Beach Florida 33483 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) **CTCorporationSystem** Name: 1200SouthPineIslandRoad Office Address: Plantation (City)

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

Ву:	Janifer Vincent
	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: Eileen M O'Gara		
Address: 501 Andrews Avenue Delray Beach Florida 33483		
		<u></u>
Vice Chairman: Kevin Hickey		
Address: 501 Andrews Avenue Delray Beach Flor(do 33483		
	na jarin kalendari	
Director:		
Address:	<del></del>	
Director:		namenta de la compansión de la compansió
Address:		
B. OFFICERS		
President: Eileen M O'Gara	7	, <u>, , , , , , , , , , , , , , , , , , </u>
Address: 501 Andrews Avenue Delray Beach Florida 33483		
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Vice President:	<u> </u>	
Address.	9	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	56	
Secretary: Kevin Hickey		
Address: 501 Andrews Avenue Delray Beach Florida 33483		
Treasurer:		
Address		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or di	rectors.	
12. <u>Then M O'Gara</u> Signature of Director or Officer		
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the fact are true and that he or she is aware that false information submitted in a document to the Department of S a third degree felony as provided for in s.817.155, F.S.		
13. Eileen M O'Gara. President		
(Typed or printed name and capacity of person signing application)		



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HES ADVISORS, 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 TWENTY-SEVENTH DAY OF MARCH, A.D.

2017.

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.

3175672 8300
SR# 20172041766
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202271892

Date: 03-27-17