## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Mumber : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120080000045 Phone : (302)545-7400 Fax Number : (302)645-1250

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

Email Address: smajot@complyup.com

### FOREIGN PROFIT/NONPROFIT CORPORATION

Compliance Management Solutions Inc.

Certificate of Status	
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Help

https://efile.sunbiz.org/scripts/efilcovr.exe

S. WARREN

10/10/2017

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#### 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.

, ,	nagement Solutions Inc.				
(Enter name of co	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"			
ComplyUp, Inc.					
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting b	usiness in Florida)		
Delawarc 2.	3				
(State or countr	(State or country under the law of which it is incorporated)  (FEI number, if applicable)				
02/09/2017					
4(Date	(Date of incorporation)  5. (Date of duration, if other than perpetual)				
10/01/2017	or mean,				
	(SEE SECTIONS 607.1501 & 607.1 t Dr., Tampa, FL 33626	in Florida, if prior to registration) 502, F.S., to determine penalty liability) ipal office address)	·		
	(Current mail	ing address, if different)			
8. Name and stree  Name:  Office Address:	et address of Florida registered agent: (P. Stephen J Majot 10409 Greenmont Dr. Tampa	O. Box <u>NOT</u> acceptable)  33626, Florida	17 OCT 10 AM 9: NECTAL ARGOR STA		

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 um 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.

To:18506176383 13026451280

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11. Nam	es and business addresses of office	ers and/or directors:			
A. DIRI	ECTORS				
Chairman	Stephen J Majot				
Address:	10409 Greenmont Dr.				
	Tampa, F1. 33626				
Vice Cha	irman:				
Address:					
Director:					
Addiess.					250 7
ж.					CT T
					SSS: 10 11LE
Address:					原名 <b>是</b> 〇
		<del></del>			
B. OFF	Sumbon i Major				
Presiden	16409 Greenmont Dr.				
Address:	T 1/1 31676				
Vice Pre	sident:				
Address					
Sceretur	y:				
Address	· :				·
T: casure	er;				
Address					
NOTE	If necessary, you may attach an a	addendum to the app	plication listing addi	tional officers a	nd/or directors.
12		55 400	0.65		
The off	icer or director signing this docume and that he or she is aware that fadegree felony as provided for in s.5	ient (and who is list lse information sub	ed in number 11 abo	ove) affirms that at to the Departn	the facts stated herein ient of State constitutes
13. Ste	phen J Majot	<del> </del>		nnlication)	
	(Typed or printed	i name and capacity	of person signing a	ppucanon	

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# laware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMPLIANCE MANAGEMENT SOLUTIONS 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 TENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMPLIANCE MANAGEMENT SOLUTIONS INC." WAS INCORPORATED ON THE EIGHTH DAY OF MARCH, A.D. 2017.

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

1.12.

6341281 8300 SR# 20176548759

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

Authentication: 203371717

Date: 10-10-17

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