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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. WARREN

MAR 19 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crimsono Education (USA) 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:

Zachary D. Norris

Name of Person

The Norris Law Firm

Firm/Company

PO Box 310969776

Address

Houston, Texas 77253

City/State and Zip code

zdnorris@nz-uslegal.co.nz

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

For further information concerning this matter, please call:

Zachary D. Norris

Name of Person

at ( 713 ) 8937835

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. Crimson Education (USA) 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

(State or country under the law of which it is incorporated)

3. 32-0495572

(FEI number, if applicable)

4. April 29, 2016

(Date of incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetual)

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 25030 South 290th Street, Queen Creek, AZ 85142

(Principal office address)

(Current mailing address, if different)

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

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr., STE 150A

Tampa, Florida 33607

(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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Jamie Beaton

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

Vice Chairman: Sharndre Kushor

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

Director: Janine Manning

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

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

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

**B. OFFICERS**

President: Jamie Beaton

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

Vice President: \_\_\_\_\_

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

Secretary: Sharndre Kushor

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

Treasurer: Janine Manning

Address: 2 Nuffield Street, Newmarket, Auckland 1023, New Zealand

**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. SHARNDRE KUSHOR, COO

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

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18 MAR 15 PM 4:27  
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 "CRIMSON EDUCATION (USA) 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-SIXTH DAY OF FEBRUARY, A.D.  
2018.



6029634 8300

SR# 20181381831

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://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.

Jeffrey W. Bullock, Secretary of State

Authentication: 202215678

Date: 02-26-18