F1800000 5007

(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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CUVER LETTER

TO:	Registration Section Division of Corporations				
CUIDI	ECT. America Asset Managemen	Com America	so Assit Management Colp.		
	Name	of corporation - mu	st include suffix /		
Dear S	ir or Madam:				
"Cuii	nede of Dilinence," of "Confined		orization to Transact Business in Florida,"		
above	referenced foreign corporation to	transact business in	Florida.		
Please	return all correspondence concern	ning this matter to th	ne following:		
Steven	L Burks				
<u> </u>		TRUBUTATION			
Amerig	go Asset Management Corp.				
		Firm/Company			
4410 L	ibrary St.				
		Audress			
Port Ch	narlotte, Florida 33948				
		City/State and Zi	p code		
bn l st34	4 <i>5@</i> aol.com				
0111015	D mail adding	(to be need for 6.	turn annual report natification)		
For fu	rther information concerning this	matter, please call:			
Steven	Steven L Burks 21 (214) 502-6836				
	N C D	at (214) 50	02-6836 Dayrima Tataphana Number		
	STREET/COURIER ADDRES	SS:	MAILING ADDRESS:		
	Registration Section		Registration Section		
	Division of Cornorations Clifton Building		Division of Corporations P.O. Box 6327		
	2661 Executive Center Circle		Tallahassee, FL 32314		
	Tallahassee, FL 32301				

LJ \$70.00 rung ree

Enclosed is a check for the following amount:

Certificate of Status

Certified Copy

Certificate of Status & Certified Copy

APPLICATION BY FUREIGN 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. Amerigo Asseri	Vianagement Corporation America	Asse	+ MANAGEMENT Co	POCRATION
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")				
inc., "Co.," "C	orp, the, Co, or Corp.			
	zoie in raorma, emer anernate corporate na			
(11 name unavani	воје ш г јогна, стег аненте согрогате п	ине апора	er for the purpose of transacting busi	mess are adiada)
2. Delaware		_ 3. <u>74-33</u>	-3259797	
(State or countr	y under the law of which it is incorporated	()	(FEI number, if applicab	ile)
June 19, 2001		5		
(D-1-	of incomposition)		(Dara - Calamatana de anternational)	
5 ,				
···	(Date first transacted busine			
	(SEE SECTIONS 607.1501 & 60	07.1502, F	.S., to determine penalty liability)	
4410 Library St.,	Port Charlotte, FL 33948			
	(Pr	incipal off	ice address)	
	(Current rr	nailing add	ress, if different)	
				٠
	<u>a mareas</u> as Francia regimered agest.	(T.O. Du	1107 acceptable)	10 0CT
				700
Name:	Steven I. Burks			26
Office Address:	4410 Library St			
	D d	1 .1	02010	<u>-</u>
	For Simion PORT MARI	otte	. Piorida 22212 33948 (Zip code)	7. HI.
	(City)		(Zip code)	, ·
. Registered ag	ent's acceptance:			
	ed as registered agent and to accept s			
	application, I hereby accept the appo			
	omply with the provisions of all statu familiar with and accept the obligatio			rjormance oj my
,		·····		
	1/2	`/		
	Two d.		261	
	(Registe	rea geni	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.

(1). (Names and business addresses of officers and/or directors)

A. DIRECTORS	
Chairman: Steven L Burks	
Address: 4410 Library St	
Port Charlotte, FL 33948	
Vice Chairman:	
Address:	· · · · · · · · · · · · · · · · · · ·
Director:	· · · ·
Address:	
 	
Larector.	~-~
Address:	
B. OFFICERS	
rtesiuein.	
Address:	
	N -7)
Vice President	.29
Address:	3
ecretary: Steven L Burks	
garess: 4410 Library St., For Chanout, FL 23746	
easurer: Steven L Burks	
dress: 4410 Library St., Port Charlose, Fl. 33948	·
NTE. If manageams was infrastruction addays super to the analysis on liceion addition	nnt officers and/or directors
Signature of Director or Officer officer or director signing this document (and who is listed in number 11 above rue and that he or she is aware that false information submitted in a document to difference felony as provided for in \$ 817.155. F.S.	
Steven I. Burks , CEO (Typed or printed name and capacity of person signing appl	igntion)
(a yped or printed name and capacity of person signing appl	ication)



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

DELAWARE, DO HEREBY CERTIFY "AMERIGO ASSET MANAGEMENT CORP." 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-SECOND DAY OF

OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMERIGO ASSET MANAGEMENT CORP." WAS INCORPORATED ON THE NINETEENTH DAY OF JUNE, A.D. 2001.

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



Authentication, 203655394

Date: 10-22-18