

F18000005663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

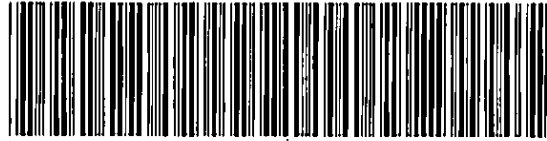
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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C. SIMMONS  
DEC 11 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 427365 8250679

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : October 7, 2018

ORDER TIME : 2:07 PM

ORDER NO. : 427365-001

CUSTOMER NO: 8250679

FOREIGN FILINGS

NAME: CYBERSURE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CyberSURE, 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:

John W. Caven

Name of Person

Firm/Company

8324 Baymeadows Way, Suite 103-3

Address

Jacksonville, FL, US, 32256-8221

City/State and Zip code

jack.caven@getCyberSURE.com

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

For further information concerning this matter, please call:

Chris.freedman@getCyberSURE.com at ( 904 ) 219-1126

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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. CyberSURE, 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 3. EIN 83-2133687  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09-12-2018 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8324 Baymeadows Way, Suite 103-3, Jacksonville, FL , 32256-8221, US  
(Principal office address)
- 8324 Baymeadows Way, Suite 103-3, Jacksonville, FL, US, 32256-8221  
(Current mailing address)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

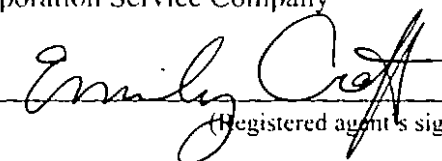
Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

Corporation Service Company

By: \_\_\_\_\_



(Registered agent's signature)

Emily Croft

Asst. Vice President

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 of the law of which it is incorporated.

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

**A. DIRECTORS**

Chairman: John W. Caven, III  
Address: 4052 Barcelona Avenue  
Jacksonville, FL 32207

Vice Chairman: Christopher L. Freedman  
Address: 353 Sawmill Lane  
Ponte Vedra Beach, FL 32082

Director: Benjamin A. Finke  
Address: 308 N Lombardy Loop  
St Johns, FL 32259

Director: Billy W. Steeghs  
Address: 4072 Coastal Avenue  
Jacksonville Beach, FL 32250

Fifth Director Shown Below:  
Michael E. Lehman  
355 19th Street  
Atlantic Beach, FL 32233

**B. OFFICERS**

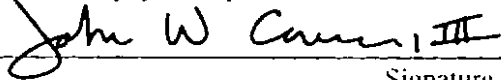
President: John W. Caven, III  
Address: 4052 Barcelona Avenue  
Jacksonville, FL 32207

Vice President: Billy W. Steeghs  
Address: 4072 Coastal Avenue  
Jacksonville Beach, FL 32250

Secretary: Michael E. Lehman  
Address: 355 19th Street, Atlantic Beach, FL 32233

Treasurer: Christopher L. Freedman  
Address: 353 Sawmill Lane, Ponte Vedra Beach, FL 32082

Note: If necessary, you may attach an addendum to the application listing additional officers and/or directors.



Signature of Director or Officer

Officer or director signing this document (and who is listed in number 12 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 degree felony as provided for in s.817.155, F.S.

John W. Caven, III; Chairman and President

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

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYBERSURE, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYBERSURE, INC." WAS INCORPORATED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2018.

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



7053757 8300

SR# 20187139997

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.

Authentication: 203610557

Date: 10-15-18