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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

TO Florida Department of State

Division of Corporations, Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 corphelp@dos.myflorida.com

850-245-6051

FROM M

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 3/29/2019

PRIORITY Routine

OUR REF # (Order ID#) 732820

ORDER ENTITY

BERT L. HOWE & ASSOCIATES, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

BERT L. HOWE & ASSOCIATES, INC. (FL)

File the attached foreign qualification document

NOTES:

\$70.00 Authorized_

Email address for annual report reminders: ppadilla@berthowe.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, March 29, 2019 Page 1 of 1

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.

(If name unavailal	ole in Florida, enter alternate corporate name ado	pted for the purpose of transa	cting business in Florida)
California		73_0647183	
(State or country under the law of which it is incorporate January 24, 1995		(FEI number, if applicable)	
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502	orids, if prior to registration) E.S. to determine penalty lia	shilin/)
5415 E. La Pal	ma Avenue, Anahiem,CA 92807	, r.o., w determine pendity the	Tim 5
	(Principal	office address)	表 3
	(Current mailing a	eddress, if different)	9 M
Name and array			T
Name and <u>street</u> Name:	address of Florida registered agent: (P.O. I Susan G. Howe	Box NOT acceptable)	9: 05 1A1E 1A1E
Name:		Box <u>NOT</u> acceptable)	
Name:	Susan G. Howe 1688 Meridian Avenue, Suite 600 Miami Beach	— — 33139 , Florida	
	Susan G. Howe 1688 Meridian Avenue, Suite 600 Miami Beach		

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. DIRE	CTORS Susan G. Howe, C.E.O.			
Chairman:	15 E. La Palma Avenue, Anaheim, CA 92807			
Address: _				
– Vice Chairr	man:			
_				
Dir e ctor: _				
Director: _		9		
Addr ess: _		20元 2		
_		- 10 m		
B. OFFIC		温温を		
President:	James P. Howe, President - COO			
Address: _	5415 E. La Palma Avenue	>		
_	Anaheim, CA 92807			
Vice Presid	Jerry L. Miles, V.P.			
Address: _	1688 Meridian Avenue, Suite 600, Miami Beach, FL 33139			
_				
Secretary: _		· · · · · · · · · · · · · · · · · · ·		
Address: _				
Treasurer:				
Address: _				
NOTE: If 12.	f necessary, you may attach an addendum to the application listing additional forms of the application and the application listing additional forms of the application and the application application and the app	ional officers and/or directors.		
12	Signature of Director or Officer			
are true and	or or director signing this document (and who is listed in number 11 aboved that he or she is aware that false information submitted in a document gree felony as provided for in s.817.155, F.S.	re) affirms that the facts stated herein to the Department of State constitutes		
13Su	usan G. Howe, C.E.O.			
	(Typed or printed name and capacity of person signing ap	plication)		

State of California

Secretary of State CERTIFICATE OF STATUS

ENTITY NAME:

BERT L. HOWE & ASSOCIATES, INC.

FILE NUMBER: FORMATION DATE:

C1920558 01/24/1995

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 27, 2019.

ALEX PADILLA
Secretary of State