

F19000001935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

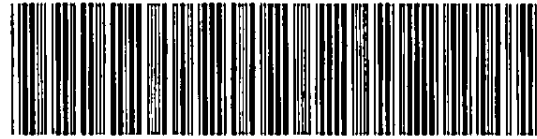
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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04/15/19--01031--019 **70.00

FILED
2019 APR 15 AM 9:00
TALLAHASSEE, FLORIDA

380 4/19/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPUTER DOCUMENT MANAGEMENT SYSTEMS

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:

PERRY B KURLANDER

Name of Person

COMPUTER DOCUMENT MANAGEMENT SYSTEMS

Firm/Company

3003 BLACK OAK CT

Address

BOYNTON BEACH, FL 33436

City/State and Zip code

PERRY.KURLANDER@CDMSPA.COM

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

For further information concerning this matter, please call:

PERRY KURLANDER

717

576-8752

at (_____) _____

Name of Person

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. COMPUTER DOCUMENT MANAGEMENT SYSTEMS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. PENNSYLVANIA 3. 23-2939379
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/30/1997 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 01/01/2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3003 BLACK OAK CT. BOYNTON BEACH, FL 33436
(Principal office address)
- SAME AS ABOVE
(Current mailing address, if different)

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

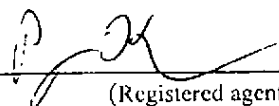
Name: PERRY B KURLANDER

Office Address: 3003 BLACK OAK CT

BOYNTON BEACH, Florida 33436
(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.

RECEIVED
DEPT. OF STATE
TALLAHASSEE, FLORIDA

2015 APR 15 PM 4:14

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: TERRY L GROSS

Address: 4143 CASCADE TERRACE

WESTON, FL 33332

Vice President: PERRY B KURLANDER

Address: 3003 BLACK OAK CT

BOYNTON BEACH, FL 33436

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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.

FILED
2018 APR 15 PM 4:14
TALLAHASSEE, FLORIDA
CLERK OF CIRCUIT COURT

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

04/03/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

COMPUTER DOCUMENT MANAGEMENT SYSTEMS, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Kathly Bookman

Acting Secretary of the Commonwealth