F1900002157

(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



600328936576

64:01... 0- 377, 1184

19 MAY -3 AM IO: 53

B KINSEY MAY - 6 2019 RECEIVED

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

ACCOUNT NO. : I2000000195

REFERENCE : 749494 7175508

AUTHORIZATION

COST LIMIT : $U \searrow 20.00$

ORDER DATE : May 2, 2019

ORDER TIME : 5:44 PM

ORDER NO. : 749494-005

CUSTOMER NO: 7175508

FOREIGN FILINGS

NAME: THORP INVESTMENT MANAGEMENT

CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Thorp Management Investment Corp	
Name of corpo	ration - must include suffix
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this Jeannette M. Ferguson	matter to the following:
Na	ne of Person
Levenfeld Pearlstein, LLC	
Firm 2 N. LaSalle Street, Suite 1300	n/Company
	Address
Chicago, Illinois 60602	
City/s	tate and Zip code
lpagents@lplegal.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	ease call:
Name of Person Are	a Code Daytime Telephone Number
Name of Ferson Are	a Code Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.

THORP INVES	STMENT MANAGEMENT CORP.				
(Enter name of c	corporation; must include "INCORPORATED Corp." "Inc." "Co," or "Corp.")	," "COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)		
DELAWARE 2.	3	83-3980510			
(State or countr	(State or country under the law of which it is incorporated) (FEI number, if applic MARCH 14, 2019				
(Date	of incorporation)	(Date of duration, if other th	(Date of duration, if other than perpetual)		
6					
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
	e Drive, #803, Naples, Florida 34108		,		
<i>I</i>	(Princi	pal office address)			
	(Current maili	ing address, if different)			
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	9a		
Name:	Corporation Service Company		Sala 1988		
Office Address:	1201 Hays Street		1		
	Tallahassec	32301 , Florida	** *** - * - *		
	(City)	(Zip code)	∏ ⊕ -		
9. Registered age	ent's acceptance:		Ō		
Having been nam	ed as registered agent and to accept serv	vice of process for the above stated	corporation at the p		

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)

Lydia Cohen
Asst. Vice President

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. DIRECTORS Donald K. Thorp Chairman: 11125 Gulf Shore Drive, #803, Naples, Florida 34108 Address: Vice Chairman: ___ Address: Director: Address: ___ Director: _ Address: **B. OFFICERS** Donald K. Thorp President: 11125 Gulf Shore Drive, #803, Naples, Florida 34108 Address: Vice President: ___ Address: _ Kay Thorp Secretary: 11125 Gulf Shore Drive, #803, Naples, Florida 34108 Address: Donald K. Thorp Treasurer: 1125 Gulf Shore Drive, #803, Naples, Florida 34108 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Donald K. Thorp, President

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

Page 1



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

DELAWARE, DO HEREBY CERTIFY "THORP INVESTMENT 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 SECOND DAY OF MAY, A.D.

2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THORP INVESTMENT MANAGEMENT CORP." WAS INCORPORATED ON THE FOURTEENTH DAY OF MARCH,

A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 202755492

Date: 05-02-19