

F19000003721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

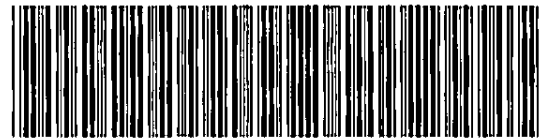
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/15/19--01011--028 **70.00

FILED
2019 AUG 12 PM 4:35
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AUG 13 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2019

DIANE GORDON
801 SECOND AVENUE, 15TH FLOOR
NEW YORK, NY 10017

SUBJECT: DAVID MASON & ASSOCIATES INC.
Ref. Number: W19000066910

We have received your document for DAVID MASON & ASSOCIATES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 919A00014889

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: David Mason & Associates 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:

Diane Gordon

Name of Person

LicenseSure LLC

Firm/Company

801 Second Avenue, 15th Floor

Address

New York, New York 10017

City/State and Zip code

rkafantzis@davidmason.com

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

For further information concerning this matter, please call:

_____ 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

FILED
 2019 AUG 12 PM 4:35
 19 AUG 12 AM 11:16
 SECRETARY OF STATE
 TALLAHASSEE, FL
 RECEIVED

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.*

David Mason & Associates, Inc.

1. _____
(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. Missouri 3. 43-1514955
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/13/1989 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 800 South Vandeventer Avenue, St. Louis, Missouri 63110
(Principal office address)

(Current mailing address, if different)

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

Name: LicenseSure LLC
Office Address: 75 N Woodward Av #85007
Tallahassee, Florida 32313
(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.

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2019 AUG 12 PM 4:35
TALLAHASSEE, FL

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

A. DIRECTORS

Chairman: David W. Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

Vice Chairman:

Address:

Director: Taylor Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

Director: Spencer Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

B. OFFICERS

President: David W. Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

Vice President: Taylor Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

Secretary: Spencer Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

Treasurer: David Mason

Address: 800 South Vandeventer Avenue, St. Louis, Missouri 63110

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.

13. David W. Mason - President

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

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

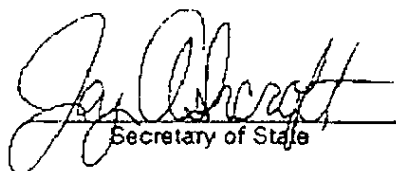
CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

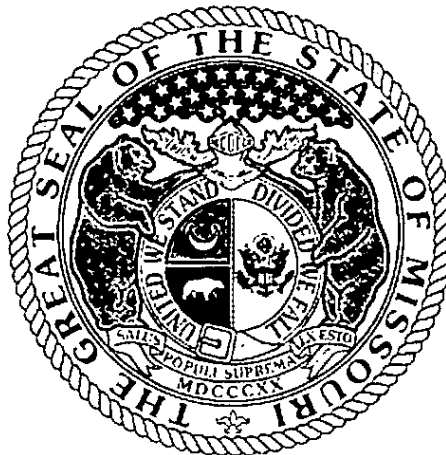
I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

DAVID MASON & ASSOCIATES, INC.
00330144

was created under the laws of this State on the 13th day of July, 1989, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 12th day of July, 2019.


Secretary of State



Certification Number: CERT-07122019-0099