

# F1900000474

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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D. BRUCE  
OCT 21 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
THE LEDGISTER GROUP INC

**SUBJECT:** \_\_\_\_\_  
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:  
MARSHA SIHA

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

17350 STATE HWY 249 STE 220

\_\_\_\_\_  
Address

HOUSTON, TX 77064

\_\_\_\_\_  
City/State and Zip code

EFFILE1234@INCFILE.COM

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

For further information concerning this matter, please call:

MARSHA SIHA 8884623453

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
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 Certificate of 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 FOR REGISTRATION TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

THE LEDGISTER GROUP 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. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
8/29/2018 PERPETUAL

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
7900 Oak Lane, Suite 400, Miami Lakes, FL 33016

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

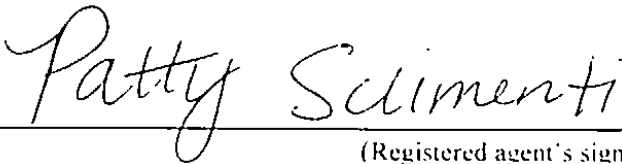
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
LEGALINC CORPORATE SERVICES INC.

Name: \_\_\_\_\_  
5237 SUMMERLIN COMMONS SUITE 400

Office Address: \_\_\_\_\_  
FORT MYERS 33907  
\_\_\_\_\_, Florida \_\_\_\_\_  
(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 designated in this application, I hereby accept the appointment as registered agent and agree to act in the future 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 state under the law of which it is incorporated.

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Orrin Ledgister

Address: 7900 Oak Lane, Suite 400, Miami Lakes, FL, 33016

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Orrin Ledgister

Address: 7900 Oak Lane, Suite 400, Miami Lakes, FL, 33016

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Orrin Ledgister

Address: 7900 Oak Lane, Suite 400, Miami Lakes, FL, 33016

Treasurer: Orrin Ledgister

Address: 7900 Oak Lane, Suite 400, Miami Lakes, FL, 33016

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

12. Orrin Ledgister

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 are true and that he or she is aware that false information submitted in a document to the Department of State is a third degree felony as provided for in s.817.155, F.S.

Orrin Ledgister (PRESIDENT)

13. \_\_\_\_\_

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

# Delaware

The First State

Pa

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE LEDGISTER GROUP INC" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GO STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORD OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE LEDGISTER GROUP INC" WAS INCORPORATED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2018.

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



7035272 8300

SR# 20197320003

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 "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 201

Date: 1