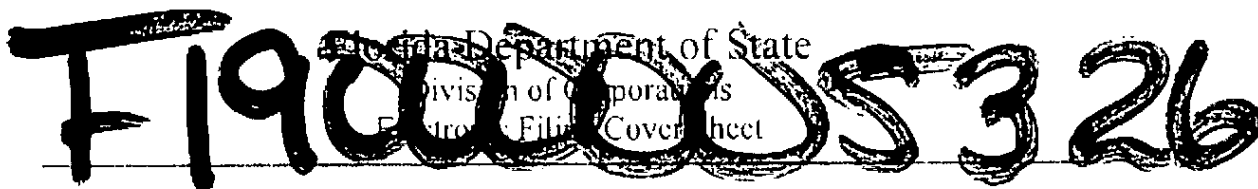


11/22/2019

Division of Corporations



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Court Innovations Incorporated

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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November 26, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: COURT INNOVATIONS INCORPORATED
REF: W19000102825

We have received your document for COURT INNOVATIONS INCORPORATED .
However, the enclosed document has not been filed and is being returned to
you for the following reason(s):

The designation of the registered office and the registered agent, both at
the same Florida street address, must be contained within the document
pursuant to Florida Statutes. The registered agent must sign accepting
the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please
call (850) 245-6052.

Mel Solomon FAX Aud. #: H19000342683
Regulatory Specialist II Supervisor Letter Number: 719A00024165

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.*

Court Innovations Incorporated

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. DE 3. 46-4826537
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01-27-2014 5. perpetual
(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)

7. 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947
(Principal office address)
- 3025 WINDWARD PLZ STE 200, ALPHARETTA, GA 30005-7451
(Current mailing address, if different)

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

Name: C T Corporation System

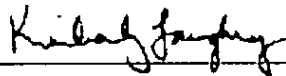
Office Address: 1200 South Pine Island Road

Plantation, 33324
(City), Florida (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.

C T Corporation System

By: Kimberly Laughrey Assistant Secretary 
(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.

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

A. DIRECTORSChairman: Nix, BillAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947Vice Chairman: Purtill, TullioAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947Director: Kristel, JohnAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947

Director: _____

Address: _____

B. OFFICERSPresident: Kristel, JohnAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947Vice President: Purtill, TullioAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947Secretary: Purtill, TullioAddress: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947Treasurer: Winters, David A.Address: 220 E Huron St, # 505, Ann Arbor, Michigan 48104-1947

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 A. Winters, Treasurer
(Typed or printed name and capacity of person signing application)

Attachment to Directors:

Kristel, John; 220 E Huron St, #505, Ann Arbor, MI 48104-1947

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Delaware

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Page 1


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COURT INNOVATIONS INCORPORATED" 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 TWENTY-SECOND DAY OF NOVEMBER, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2019 NOV 22 PM 2:55




Jeffrey W. Bullock, Secretary of State

5472324 8300

SR# 20198245043

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204066683

Date: 11-22-19