

F1900000533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

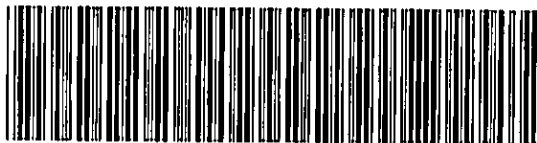
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000086485

Office Use Only



800334210018

12/03/19--01004--001 **950.00

03/19/19--01038--001 **70.00

FILED
2019 DEC -2 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2019

WENDY PORTER-FRANCES
7960 STROMESA CT.
SAN DIEGO, CA 92126

SUBJECT: AQUANEERING INC
Ref. Number: W19000086485

We have received your document for AQUANEERING 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$950.00.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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.

Yvette Scott
Document Specialist II

Letter Number: 719A00019803

COVER LETTER

TO: Registration Section
Division of Corporations

AQUANEERING 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:
WENDY PORTER-FRANCIS

Name of Person
AQUANEERING INC

Firm/Company
7960 STROMESA CT

Address
SAN DIEGO, CA 92126

City/State and Zip code
wendyf@aquaneering.com

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

For further information concerning this matter, please call:

Wendy Porter-Francis 858 578-2028

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.

AQUANEERING, 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)
CALIFORNIA 33-0614302

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
03/03/1994

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
11/04/2016

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7960 STROMESA CT, SAN DIEGO, CA 92126

7. _____
(Principal office address)

(Current mailing address, if different)

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

WILLIAM KILGORE

Name: _____

1323 JOHNS COVE LANE

Office Address: _____

OAKLAND

34787

(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.

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

A. DIRECTORS

Chairman: MARK FRANCIS ✓
Address: 7960 STROMESA CT
SAN DIEGO, CA 92126

Vice Chairman: WENDY PORTER-FRANCIS ✓
Address: 7960 STROMESA CT
SAN DIEGO, CA 92126

Director: _____
Address: _____

Director: _____
Address: _____

FILED
2019 DEC -2 PM 4:15
SICILIANI & STATE
TALLAHASSEE, FLORIDA

B. OFFICERS

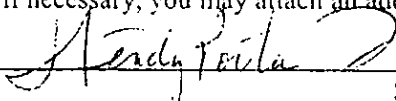
President: MARK FRANCIS ✓
Address: 5472 THUNDERBIRD LANE
LA JOLLA, CA 92037

Vice President: WENDY PORTER-FRANCIS ✓
Address: 5472 THUNDERBIRD LANE
LA JOLLA, CA 92037

Secretary: WENDY PORTER-FRANCIS ✓
Address: 5472 THUNDERBIRD LANE, LA JOLLA, CA 92037

Treasurer: MARK FRANCIS ✓
Address: 5472 THUNDERBIRD LANE, LA JOLLA, CA 92037

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. WENDY PORTER-FRANCIS, VICE PRESIDENT
(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

AQUANEERING, INC.

FILE NUMBER: C1740121
FORMATION DATE: 03/03/1994
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
2019 DEC -2 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 08, 2019.

ALEX PADILLA
Secretary of State