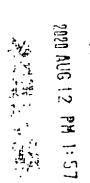
## F20000003498

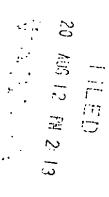
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Ďocument Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
90°S					

Office Use Only



800350146898





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 373927

AUTHORIZATION :

COST LIMIT :

ORDER DATE : July 31, 2020

ORDER TIME : 10:08 AM

ORDER NO. : 373927-075

CUSTOMER NO: 8275785

## FOREIGN FILINGS

NAME: JOSEPHSON-WERDOWATZ &

ASSOCIATES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

## **COVER LETTER**

•	ΓO: Registration Section Division of Corporations				
SUBJECT	Sosephson-Werdowatz & Associates, Inc	oc .			
Name of corporation - must include suffix					
Dear Sir or	Madam:				
"Certificate		for Authorization to Transact Business in Florida." Standing" and check are submitted to register the siness in Florida.			
Please retur	rn all correspondence concerning this ma	atter to the following:			
WenDee Su	llivan				
	Name	e of Person			
Josephson-V	Verdowatz & Associates, Inc.				
	Firm/C	Company			
6370 Lusk E	3lvd., Suite F200				
	Ac	address			
San Diego, G	CA 92121				
<del></del>	City/Stat	ate and Zip code			
wsullivan@j	jwa-se.com				
_	E-mail address: (to be use	sed for future annual report notification)			
For further	information concerning this matter, pleas	ase call:			
	at ( nme of Person Area C	Code Daytime Telephone Number (			
Na	ime of Person Area C	Code Daytime Telephone Number :			
Reg Div The 241	REET/COURIER ADDRESS: gistration Section vision of Corporations e Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, FL 32303	MAILING ADDRESS:  Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
	a check for the following amount: check payable to: FLORIDA DEPARTME Filing Fee \$ \$78.75 Filing Fee & Certificate of Status	ENT OF STATE  \$78.75 Filing Fee & \$87.50 Filing Fee.  Certified Copy  Certified Copy  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.

	lowatz and Associates, Inc.	CONTRACTOR CORRORS	
	orporation: must include "INCORPORATED," orp," "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATIC	JN, T
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transact	ing business in Florida)
San Diego, Cali	fornia 3	3-0565592	
(State or countr	$\frac{\text{fornia}}{\text{y under the law of which it is incorporated}} 3. \frac{3}{\text{y under the law of which it is incorporated}}$	(FEI number, if a	applicable)
06/01/1993	5		
(Date	of incorporation) 5	(Date of duration, if other	r than perpetual)
	(Date first transacted business in F	florida, if prior to registration)	
	(SEE SECTIONS 607.1301 & 607.130.	2, F.S., to determine penalty liabi	ility)
6370 Lusk Blvd.,	Suite F200, San Diego, CA 92121		
	(Principal office	street address)	
	-		
	(Current mailing	address, if different)	
Nome and stand	and address of Florida mulistrand a control (D.O.	D MOT	<u>≥ 70</u>
ivame and stree	et address of Florida registered agent: (P.O.	BOX NOT acceptable)	; ;
Name:	Corporation Service Company		
ffice Address:	1201 Hays Street		12
	Tallahassee	Florida	j· ≧ C
	(City)	Zip code)	19 2 13
		( - <b>f</b> )	$\overline{\omega}$
	ent's acceptance: ed as registered agent and to accept service	af management of the sales at t	
	eu as registerea agem and to accept service application, I hereby accept the appointme		
irther agree to co	omply with the provisions of all statutes reli	itive to the proper and compl	
id I am familiar	with and accept the obligations of my posit	ion as registered agent.	
C	orporation Service Company	m / ^	Amanda Robinson
В	V. Smansla & Ale	Moon	Asst. Vice President
	(Registered agent's sign	ature)	<del>.</del>

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.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

A. DIRECTORS				
□Chairman	Name: Carl H. Josephson	Chairman	□Chairman Name:	
□Vice Chairman	Address:	□Vice Chairman	Address: 6370 Lusk Blvd., Suite F200	
□Dircctor	San Diego, CA 92121	□Director	San Diego, CA 92121	
President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	Secretary	□Treasurer	
Other	Other	Other	Other	
□Cheirman	Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President	<del></del>	□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	Other	□Other	Other	
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director	<u> </u>	
□President		□President		
□Vice President	<del>_</del>	□Vice President		
Secretary	□Treasurer	☐ Secretary	☐Treasurer	
□Other	Other	□Other	Other	
individuals may be	Use an attachment to report more than six (6). The att added to the index when filing your Florida Department			
12.	Signature of Director	or Officer		
	tor signing this document (and who is listed in numb- ise information submitted in a document to the Depar	er 11 above) affirms tha		



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

Entity Name:

JOSEPHSON-WERDOWATZ & ASSOCIATES, INC.

File Number:

C1725829

Registration Date:

06/01/1993

Entity Type:

DOMESTIC STOCK CORPORATION

Jurisdiction:

CALIFORNIA

Status:

ACTIVE (GOOD STANDING)

As of August 10, 2020 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, 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 August 11, 2020.

ALEX PADILLA Secretary of State

Certificate Verification Number: YWAMPNZ