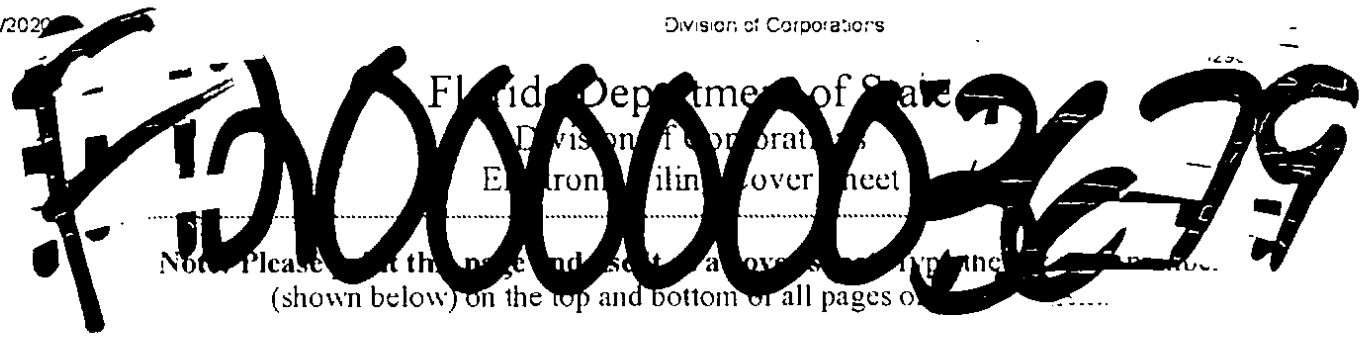


8/21/2020

Division of Corporations



Note: Please print the page and use it as a cover sheet for the filing (shown below) on the top and bottom of all pages of the filing.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

**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
CORDASCO FINANCIAL NETWORK, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

AUG 21 2020
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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.

1. CORDASCO FINANCIAL NETWORK, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. 10/13/2011

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. N/A

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

7. 405 FIFTH AVENUE SOUTH, SUITE 5-A, NAPLES, FL 34102

(Principal office street address)

(Current mailing address, if different)

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

Name: CORPORATION SERVICE COMPANY

Office Address: 1201 HAY'S ST

TALLAHASSEE


(City)

Florida 32321

(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS

☐ Chairman Name: STEVE CORDASCO
☐ Vice Chairman Address: 405 FIFTH AVENUE SOUTH
☐ Director SUITE 5-A
☐ President NAPLES, FL 34102
☐ Vice President
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other Founder

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

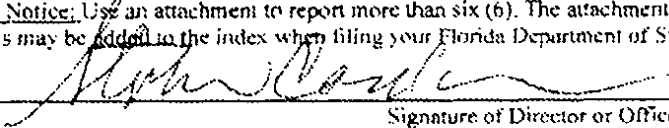
☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: GIL FREEMAN
☐ Vice Chairman Address: 405 FIFTH AVENUE SOUTH
☐ Director SUITE 5-A
☐ President NAPLES, FL 34102
☐ Vice President
☐ Secretary ☐ Treasurer
☒ Other COO ☐ Other GEN MANAGER

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. STEVE CORDASCO, FOUNDER AND CEO

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

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Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORDASCO FINANCIAL NETWORK, INC." 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-FIRST DAY OF AUGUST, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CORDASCO FINANCIAL NETWORK, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF OCTOBER, A.D. 2011.

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



A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

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SR# 20206874791

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

Authentication: 203514662

Date: 08-21-20

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