

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000444780 3)))



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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)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

Evernorth Strategic Development, Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 06 |
| Estimated Charge | \$78.75 |

Electronic Filing Menu Corporate Filing Menu

Help

From: Ranae McGraw

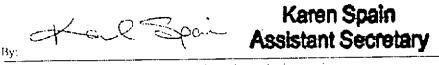
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

| Evernorth Strates | gic Development, Inc. | | |
|-------------------|---|--|------------------|
| (Enter name of co | orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Com") | "COMPANY," "CORPORATION," | |
| (If name unavaila | ble in Florida, enter alternate corporate name a | idopted for the purpose of transacting busin | ness in Florida) |
| Delaware | | 85-2732455 | |
| 08/25/2020 | • | (FEI number, if applicable | |
| (Date | of incorporation) | (Date of duration, if other than p | |
| | (Date first transacted business in (SEE SECTIONS 607,1501 & 607,15 7, St. Louis, MO 63121 | n Florida, if prior to registration) 102, F.S., to determine penalty liability) | ~) |
| / | (Princip | al office address) | |
| | (Curent mailir | ng address, if different) | .: |
| 8. Name and stres | et address of Florida registered agent: (P.C CT Corporation System | D. Box NOT acceptable) | · |
| Office Address: | 1200 South Pine Island Road | | 7 |
| Office . Worked. | Plantation, | 33324 , 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 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. DIRE | CTORS | |
|------------------|--|--------------|
| Chairman | Please see the attached rider. | |
| | | |
| Address: _ | | |
| - | | |
| Vice Chair | man. | |
| Address | | |
| _ | | |
| Director: | | |
| | | |
| | | |
| • | | |
| | | |
| Address: | | 1 |
| | | |
| B. OFFI | ICERS | .5 |
| President. | Please see the attached rider. | <u></u> |
| | | <u>.</u> |
| | | ·) |
| ve n e | ident | |
| | | |
| Address: | | |
| | | |
| Secretary | | |
| Address: | | |
| Treasurer | | |
| Addresst | | |
| NOTE: | If necessary, you may attach an addendum to the application listing additional officers and/or director. | s . |
| 1.1.1 | ill Stadelman | |
| | Signature of Director or Officer | ol harain |
| are true a | per or director signing this document (and who is listed in number 11 above) affirms that the facts state and that he or she is aware that false information submitted in a document to the Department of State congress felony as provided for in s.817.155, F.S. | onstitutes |
| 13. <u>J</u> ärs | Stadelman, Secretary | |
| | (Typed or printed name and capacity of person signing application) | |

Te: 18506176383

EVERNORTH STRATEGIC DEVELOPMENT, INC.
Application by Foreign Corporation for Authorization to Transact Business in Florida

Rider to Item Eleven

Director of Evernorth Strategic Development, Inc.

| <u>Name</u> | <u>Title</u> | Address |
|-------------|--------------|--|
| Amy C. Cook | Director | 900 Cottage Grove Road Bloomfield, CT 06002 |

Officers of Evernorth Strategic Development, Inc.

| <u>Name</u> | Title | Address | |
|-----------------|--|--|--|
| Timothy Buckley | President | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| | | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Joanne Hart | Vice President and Assistant Treasurer | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Scott Lambert | Vice President, Treasurer and Assistant Treasurer | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| John Mimlitz | Vice President | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Drew Reynolds | Vice President and Assistant Treasurer | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| David Scheibe | Vice President | 900 Cottage Grove Road 3 Bloomfield, CT 06002 | |
| Derek Stumpf | Vice President | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Jill Stadelman | Secretary | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Jane Jusino | Assistant Secretary | 900 Cottage Grove Road Bloomfield, CT 06002 | |
| Sandra Schmehl | Assistant Secretary | 900 Cottage Grove Road | |

| | | Bloomfield, CT 06002 |
|--------------|---------------------|--|
| Susan Metrow | Assistant Secretary | 900 Cottage Grove Road Bloomfield, CT 06002 |
| Lynn Perez | Assistant Secretary | 900 Cottage Grove Road Bloomfield, CT 06002 |

To: 18506176383



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EVERNORTH STRATEGIC DEVELOPMENT, 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 THIRTIETH DAY OF DECEMBER,

A.D. 2020.

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

and a consideration of the constant of the con

Authentication: 204445733

Date: 12-30-20