F3100000158

(Req	uestor's Name)	 		
(Add	ress)			
(Add	ress)			
(City.	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900356804549

12/28/20--01030--014 **78.75

HILED 2020 DEC 28 PH 3: 30 SECRETARY OF STATE



COVER LETTER

TO:	Registration Se Division of Cor	porations	,	- , -	_	
SUBJ	F.CT∙	Ressonal In	1/25-1190	ations -	Inc.	
5010		Name of corpor	ration - must	include suffix		
Dear S	ir or Madam:				S	2021
"Certif	icate of Existenc	ion by Foreign Corporation e," or "Certificate of Good in corporation to transact b	Standing" a	nd check are sub		
Please	return all corresp	oondence concerning this n		following: eDonal	d see	PH 3:
		Nan	ne of Person	-		30
		Personal -	Inves-	heation.	s Inc	
		Firm	/Company	9	<u> </u>	
		24 laher	eni la	Venuo		
-			Address	V-EV(100E		
		West Is	lip, A	14 117	95	
		City/St	are and Zip	code		
	ANO	Lymcd. Person E-mail address: (10 be 1	alinv ised for futur	e annual report r	outication)	<u> </u>
For fu	ther information	concerning this matter, ple	ease call:			
	Indraw 1	McDonalelai C	9/7)_	656-8	289	_
	Name of Perso	n Area	Code	Daytime Telep	hone Number	
	STREET/COU	URIER ADDRESS:		MAILING A	DDRESS:	
	Registration Se			Registration S		
Division of Corporations The Centre of Tallahassee Division of Corporations P.O. Box 6327						
		e Street, Suite 810		P.O. Box 6327 Tallahassee, FL 32314		
		the following amount:	IENT OF ST	a T F		
	.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.7	5 Filing Fee & Ted Copy	S87.50 Filin Certificate	of Status &

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.
Personal Investigations Fuc.
(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. New York 3. 36-4599720 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12 2 2006 5. (Date of incorporation) 5. (Date of duration, if other than perpendial)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7.
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: McDonald
Office Address: 5558 Palmer Circle #105
Liphewood Ranch Florida 34211 (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

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS	1/ 1/ 0/						
□ Chairman	Name: Andraw McVonsld	□Chairman	Name:				
□Vice Chairman	Address: 24 lake view Are	□Vice Chairman	Address:				
□Director	West Is 17, NY 11795	□Director					
President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□Secretary		Treasurer			
Other	Other	□Other		Other			
□Chairman □Vice Chairman □Director	Name:	□Chairman □Vice Chairman □Director	Name:	EC 28 R			
□President		President		my w			
□Vice President		□Vice President		7ATE 30			
Secretary	☐Treasurer	□Sccretary		Treasurer			
Other	Other	□Other		Other			
□Chairman	Name:	□Chairman					
Director		□Director	-				
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary		□Treasurer			
Other	Other	□Other		□Other			
Important Notice: Use an attachment to report prore 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							
s.817,155, F.S.	lise information submitted in a document to the Departm	ent of State constitu	tes a third degree	telony as provided for in			
(Typed or printed name and capacity of person signing application)							

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of PERSONAL INVESTIGATIONS, INC. was filed on 12/12/2006, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



2020 DEC 28 PM 3: 31
SECRETARY DE STATI

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 09th day of December two thousand and twenty.

Brada C Hyles

Brendan C Hughes
Executive Deputy Secretary of State