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SECNETARY OF STATE
SECNETARY OF STATE



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: iMare, Inc.		
	- must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for a "Certificate of Existence," or "Certificate of Good Standardove referenced foreign corporation to transact business	ding" and check are submitted to register the	
Please return all correspondence concerning this matter	to the following:	
Heather A. May		
Name of I	Person	
Old Republic Title Tech Companies, Inc.		
Firm/Com	pany	
6111 W. Plano Pkwy Suite 3800		
Addre	rss	
Plano, TX 75093		
City/State at	nd Zip code	
legal@ortitletech.com		
E-mail address: (to be used f	or future annual report notification)	
For further information concerning this matter, please c	all:	
Heather A. May 972	943-5322	
Name of Person Area Code) Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	OF STATE 1 \$78.75 Filing Fee &	

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.

iMarc, Inc.			
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION	."
(If name unavail:	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting	g business in Florida)
New Hampshire	:	3	
(State or countr	y under the law of which it is incorporated)	3(FEI number, if app	plicable)
July 13, 1993		5.	
	of incorporation)	(Date of duration, if other t	han perpetual)
·			
		s in Florida, if prior to registration) (1502, F.S., to determine penalty liabilit	ay)
2 Pillsbury Street	. Box 500 Concord, NH 03301		
·		office street address)	
6111 W. Plano P	kwy Suite 3800 Plano, TX 75093		
	(Current ma	iling address, if different)	
. Name and stree	<u>et address</u> of Florida registered agent: (I	P.O. Box NOT acceptable)	
Name:	Registered Agent Solutions, Inc.		_
Office Address:	2894 Remington Green Ln. Stc. A		2023 JUN 23 PM SECTIVE NAMES OF SECTION SECTIONS OF SECTION SE
	Tallahassee	, Florida <u>32308</u>	
	(City)	(Zip code)	13.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5
	ent's acceptance:		S 95
lesignated in this urther agree to c	ned as registered agent and to accept se application, I hereby accept the appoin omply with the provisions of all statute with and accept the obligations of my	ntment as registered agent and agre s relative to the proper and complet	e to act in th is c op acity.
	Jackyn Winget	Jaclyn Wright, Asst. Secretary	
	(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.

A. DIRECTORS Paula Maurstad Heather A. May ☐ Chairman □ Chairman Name: 11055 Wayzata Blvd. 6111 W. Plano Pkwy Suite 3800 ☐ Vice Chairman Address: ☐ Vice Chairman Address: Minnetonka, MN 55305 Plano, TX 75093 Director □ Director ■President □ President □Vice President ☐ Vice President □Treasurer ☐ Treasurer ☐ Secretary Secretary □Other _____ □Other _____ □Other ____ □Other _____ Name: Ben Corbett □Chairman □Chairman Name: 11055 Wayzata Blvd. Address: □ Vice Chairman □ Vice Chairman Address: Minnetonka, MN 55305 □ Director □ Director □ President ☐ President □ Vice President ___ ☐ Vice President ☐ Secretary ■ Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ Other _____ Name: _____ □Chairman □ Chairman Name: □Vice Chairman Address: □ Vice Chairman Address: ____ □Director □Director □President ☐ President □Vice President __ □ Vice President □ Secretary □Treasurer □ Secretary □ Treasurer ☐Other _____ □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. Heather A. May 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.

, Heather A. May, Secretary

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State of New Hampshire Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that IMARC, INC, is a New Hampshire Profit Corporation registered to transact business in New Hampshire on July 13, 1993. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 193440

Certificate Number: 0006228180



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 11th day of May A.D. 2023.

David M. Scanlan Secretary of State