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C T CORPORATION SYSTEM			
Requestor's Name 660 East Jefferson Street			SECRETAR SIVISION OF C 95 DEC 15
Addrese Tallahassee, Florida 323	01		ETARY
City State Zip	Phone 4-222-1092		CORPORATION PH 12: 12
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Name Availability	3:00	
Document	<b>.</b> .	PLEASE RETURN EXTRA COPY(S) FILE STAMPED
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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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.	Nicholas-Applegate Cap	Ital Management Holdings,	Inc.	
1	words or abbreviations of like		", "COMPANY", "CORPORATION" indicate that it is a corporation ins le at present.)	
2. <u>California</u> (State or country under the law of which it is incorporated)		3. <u>33-0660437</u> (FEI number, if applicable)		
4.	04/27/95	5. perpetual		g
	(Date of Incorporation)	(Duration: Year corp. wil	I cease to exist or "perpetual"	NSEC .
6.	upon qualification		EC	Se l

(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156,

7. \_\_\_600 West Broadway, 30th Floor, San Diego, CA 92101

(Current mailing address)

 Acting as General Partner of the limited partnership (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

 Name:
 C T CORPORATION SYSTEM
 Structure

 Office Address:
 c/o C T Corporation System, 1200 South Pine Island Roatt
 Structure

 Plantation
 , Floride, 33324
 Structure

 (Zip Code)
 Structure

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10. Registered agent 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.

**C T CORPORATION SYSTEM** 

(Registered agent's signature) (Officer)

D.F. Hickey, Assistant Secretary

(Type Name and Title of Officer)

11. 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.

12. Names and addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_\_\_\_ Address: Vice Chairman: \_\_\_\_\_\_ Address: \_\_\_\_\_ Director: ARTHUR E. MICBOLAS Address: \_\_\_\_\_\_ 600 WEST BROADWAY, SUITE 2900 SAN DIEGO, CA 92101 Director: Address: \_\_\_\_\_ **B. OFFICERS** President: \_\_\_\_ARTHUR E.\_\_NICHOLAS Address: \_\_\_\_\_\_ 600 WEST BROADWAY, SUITE 2900 SAN DIEGO, CA 92101 / Vice President: \_\_\_\_\_ Address: \_\_\_\_\_ \*

Secretary: \_\_\_\_\_E, BLAKE MOORE, JR, \_\_\_\_

Address: \_\_\_\_\_\_ 600 WEST\_BROADWAY, SUITE 2900\_\_\_\_

SAN DIEGO, CA 92101

Treasurer: THOMAS FINDELSKI Address: 600 WEST BROADWAY, SUITE 2900 SAN DIECO, CA 92101

NOTE: If necessary, you may attach an addenidum to the application listing additional officers and/or directors.

13. U (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Moore 15 5\_ Seco Ó 75 14. (Typed or printed name and capacity of person signing application)

