

(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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SECRETARY OF STATE
SECRETARY OF STATE

14

### **COVER LETTER**

TO: New Filing Section Division of Corporations	
	SCTING CROUP, TAC. ration - must include suffix)
Dear Sir or Madam:	
	for Authorization to Transact Business in Florida," I to register the above referenced foreign corporation to
Please return all correspondence concerning this m	atter to the following:  de A Houssaye  ne of Person)
COPS A COM:	SULTING GROUP, INC.
630 NE	Address)
MIAMI, FO	tate and Zip code)
For further information concerning this matter, ple	ase call:
(Name of Person) (A	rea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

## 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. SMITUSMO (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) country under the law of which it is incorporated)

3. 26-115863
(FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") \_\_\_\_\_ 5. \_\_\_ (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address:

10. 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.

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 business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: Dr Pau de la Houssaye	
Address: 1807 N. McKINIEY ST. LITTLE POCK, AR 72207	)
Vice Chairman:	
Address:	Lange St.
Director:	m
Address:	?
Director:	
Address:	
B. OFFICERS  President: Jon Pau de la Houssaye  Address: 1807 N. McKingey St. Citre Pock, AR 7220	
Vice President:	
Address:	
Secretary: AM SCHENCK	
Address: 1807 N. Mc KINLEY ST. LITTLE POCK, AR 72705)	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. Company of the state of the	
(Signature of Director or Officer listed in number 12 of the application)  14. (Typed or printed name and capacity of person signing application)	



# **Arkansas Secretary of State Charlie Daniels**

State Capitol Building ◆ Little Rock, Arkansas 72201-1094 ◆ 501-682-3409

OT DEC 17 PH 2: 34
SECRETARY OF STATE

### **Certificate of Good Standing**

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

#### CORSA CONSULTING GROUP, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office October 1, 2007.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 13th day of December 2007.

Charlie Daniels Secretary of State

Online Certificate Authorization Code: bceab315fb087b5

To verify the Authorization Code, visit sos.arkansas.gov