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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: 000638.162278
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FOREIGN PROFIT/NONPROFIT CORPORATION
ADVANCED MANAGEMENT SYSTEMS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	060
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February 29, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: ADVANCED MANGEMENT SYSTEMS, INC.
REF: W12000011743

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

It appears that the word MANGEMENT in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled MANAGEMENT. If you did not misspell this word intentionally, please correct the spelling to read MANAGEMENT and resubmit the document for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ADVANCED MANAGEMENT SYSTEMS, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check pre submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KAREN LENKEY, PARALEGAL

Name of Person

ROSENBERG MARTIN GREENBERG, LLP

Firm/Company

25 SOUTH CHARLES STREET, SUITE 2115,

Address

BALTIMORE, MARYLAND 21201

City/State and Zip code

klenkey@rosenbergmartin.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN LENKEY, PARALEGAL

Name of Person

at (**410**)

727-8674

Area 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 &
Certified Copy

\$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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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.

1. ADVANCED MANAGEMENT SYSTEMS, INC.
(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. MARYLAND 3. 20-5771351
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-25-2008 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. MARCH 1, 2012
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 209 16TH STREET, OCEAN CITY, MARYLAND 21842
(Principal office address)

209 18TH STREET, OCEAN CITY, MARYLAND 21842
(Current mailing address)
MANAGEMENT SERVICES

8. _____
(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: National Corporate Research, Ltd., Inc.

Office Address: 185 Office Plaza Drive

Tallahassee Florida 32301
(City) (Zip code)

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.

Rae Marie Cole, Asst. Sec.
(Registered agent's signature)

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Patrick J. McLaughlin, Sole Director

Address: 209 16TH STREET, OCEAN CITY, MARYLAND 21842

Director: _____

Address: _____

B. OFFICERS

President: Patrick J. McLaughlin

Address: 209 16TH STREET, OCEAN CITY, MARYLAND 21842

Vice President: _____

Address: _____

Secretary: PATRICK J. MCLAUGHLIN

Address: 209 16TH STREET, OCEAN CITY, MARYLAND 21842

Treasurer: PATRICK J. MCLAUGHLIN

Address: 209 16TH STREET, OCEAN CITY, MARYLAND 21842

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

13. Patrick J. McLaughlin 2/26/2012

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.817.133, F.S.

14. PATRICK J. MCLAUGHLIN, SOLE DIRECTOR

(Typed or printed name and capacity of person signing application)

STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ADVANCED MANAGEMENT SYSTEMS, INC., INCORPORATED OCTOBER 25, 2006, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HERESUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS FEBRUARY 27, 2012.



Paul B. Anderson
Charter Division



SECRETARY OF STATE
TALLMANSSEEK, MARYLAND

12 FEB 29 AM 11:23

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Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 0007500116
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Fax (410) 333-7097

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