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Special Instructions to	Filing Officer:	1
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TRANSMITTAL LETTER

TO: Registration Se Division of Co				
SUBJECT:	Terri Mat	thews, INC.		
		ration - must include suffix)		
Dear Sir or Madam:			·	
The enclosed "Applica "Certificate of Existent transact business in Flo	tion by Foreign Corporation ce," and check are submitted orida.	for Authorization to Transa to register the above referen	ct Business in Florida," need foreign corporation to	
Please return all corres	pondence concerning this ma		·	
	1 4 (1401)	ne of Person)		
Terri M	atthews, IN	C. /Company)		
220 N.	Chickasau	Address)		
Pauls Va	. `	73075 (ate and Zip code)		
For further information Pagg Nippe Name of Per	at (40	<u>-</u>	SECRETARIAS SEE FL. Second Number)	71115 JAN 24 PM 1:58
STREET AD Registration S Division of Co 409 E. Gaines Tallahassee, F	ection orporations St.	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Sorporations 77	-: -: -: -: -:
Enclosed is a check for	r 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	

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. Terri Matthews, 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. OH (State or country under the law of which it is incorporated) 3. 134 7276 (FEI number, if applicable)	
4. 53689 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	
6. NA (Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502 F.S., to determine penalty liability) 7. 220 N. Chickasaw St. Valley OK 73075 (Principal office address)	-
Current mailing address)	
8. General Contractor (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)	, -
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: CompDirect Agents, INC.	
	л Ж
Talla hassee , 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.

Ecl Lary, (Registered agent's signature) ASSI. Socretary

- 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. DIREC	CTORS				
Chairman:	NA	_:		<u> </u>	
Address: _	<u> </u>	<u> </u>			<u>-</u> _
			<u> </u>		
Vice Chairn	man:				
Addiess		-			<u>· · · -</u>
		<u> </u>			· · · · · ·
Address: _					
_					
Director: _	 =	<u> </u>			<u> </u>
Address: _	<u> </u>	<u></u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>
_				<u></u>	<u> </u>
B. OFFIC	FRS				
		. .e.			
	Terri Matthew				<u> </u>
Address: _	RR3 Pauls Valley,	00 73075			
_	0 . 1/ .				720
Vice Preside	ent: Carolyn Mat	thous		<u></u>	- <u>S</u>
Address: _	ent: <u>Carolyn Mat</u> RR#3 Pauls	Valley, OK 73	75	A S	AN T
_				SEC	<u> </u>
Secretary:	Carolyn Mat	Hhews			3 C
Address: _	Same				27
Treasurer:	Terri Matth	+ WS		A	ω
Address: _	Same				-
Address	04,11		·		•
NOTE: If	necessary, you may attach an add	dendum to the application lis	sting additional office	rs and/or director	\$.
13.	\sim				
1.5.	(Signature of Director	r or Officer listed in number	12 of the application)	
14. <u>Te</u>		- President			
	(Typed or printed no	ame and capacity of person	signing application)		

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that TERRI MATTHEWS, INC. whose registered agent is <u>CAROLYN MATTHEWS</u>, with its registered office at <u>220 N CHICKASAW</u>

PAULS VALLEY 73075 USA Oklahoma is a <u>Domestic For Profit Business</u>

Corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto

set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 23rd, day of

December, 2004.

Secretary Of State

M. husan Javag

SECRETARY STATE