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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Solutio, 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," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Andrew Gorges

(Name of Person)

Solutio, Inc.

(Firm/Company)

1516 N Cleary Ln

(Address)

Goddard, KS 67052

(City/State and Zip code)

For further information concerning this matter, please call:

Andrew Gorges

(Name of Person)

at (316) 516-0366

(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

**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. Solutio, 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. Kansas

(State or country under the law of which it is incorporated)

3. 26-2834369

(FEI number, if applicable)

4. 7/1/2008

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

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

7. 1516 N Cleary Ln, Goddard, KS 67052

(Principal office address)

1516 N Cleary Ln, Goddard, KS 67052

(Current mailing address)

8. Transact any and all lawful business.

(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:

InCorp Services, Inc.

Office Address:

17888 67th Court North

Loxahatchee

(City)

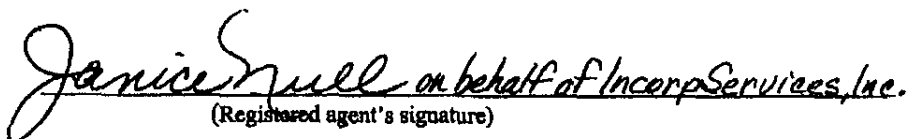
, Florida

33470

(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.


(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:

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A. DIRECTORS

Chairman: Please see attachment A

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Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please see attachment A

Address: _____

Vice President: _____

Address: _____

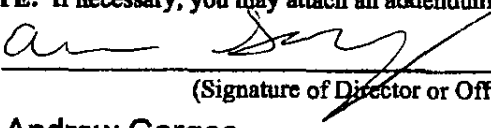
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Andrew Gorges
(Typed or printed name and capacity of person signing application)

Attachment A

Directors*

Name	Address
Andrew Gorges	1516 N Cleary Ln Goddard, KS 67052
D. Travis Gear	252 S Lark Wichita, KS 67209
Albert Jirak	4020 N 167th St W Colwich, KS 67030

* Chairman and Vice-Chairman are not designated positions in this board.

Officers

Title	Name	Address
Co-President	Andrew Gorges	1516 N Cleary Ln Goddard, KS 67052
Co-President	D. Travis Gear	252 S Lark Wichita, KS 67209
Co-President	Albert Jirak	4020 N 167th St W Colwich, KS 67030
Treasurer	Andrew Gorges	1516 N Cleary Ln Goddard, KS 67052
Secretary	Andrew Gorges	1516 N Cleary Ln Goddard, KS 67052

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STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
RON THORNBURGH

To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to business entities and that I am the proper official to execute this certificate.

Entity Name: SOLUTIO, INC.

Structure: KANSAS FOR PROFIT CORPORATION

Business Entity ID Number: 4217055

Was filed in this office on July 01, 2008 and has complied with the applicable provisions of the laws of the state of Kansas and on this date is in good standing and authorized to transact business or to conduct affairs within this state



In testimony whereof: I hereto set my hand and cause to be affixed my official seal. Done at the City of Topeka, this 12 of November , 2008.

RON THORNBURGH
SECRETARY OF STATE

Certificate ID: 188313 - To verify the validity of this certificate please visit <https://www.accesskansas.org/businessentity/validate.html> and enter the certificate ID number.

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