

FI 000001252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

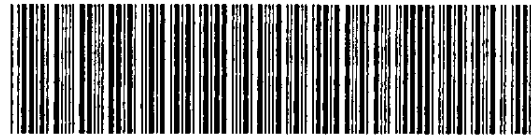
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAR 21 PM 1:30

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J. Shivers MAR 23 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RKA INTEGRATED 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 are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

David F. Rolewick, Esq.

Name of Person

Rolewick & Gutzke, P.C.

Firm/Company

1776 S. Naperville Road, Suite 104A

Address

Wheaton, Illinois 60189

City/State and Zip code

rg@rglawfirm.com

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

For further information concerning this matter, please call:

David F. Rolewick

Name of Person

at (630) 653-1577

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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TALLAHASSEE, FL 32301

MLR → MLC
MAR 15 2011

**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. RKA INTEGRATED 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. Delaware 3. 27-5214409
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 17, 2011 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. February 1, 2011
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8192 College Parkway, B41, Fort Myers, FL 33919
(Principal office address)

8192 College Parkway, B41, Fort Myers, FL 33919
(Current mailing address)

8. to engage in any lawful act or activity for which corps may be organized
(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: Thomas R. Lochridge


Office Address: 8192 College Parkway, B41

Fort Myers, Florida 33919
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Thomas R. Lochridge

Address: 8192 College Parkway, B41

Fort Myers, FL 33919

Director: Laronda K. Lochridge

Address: 8192 College Parkway, B41

Fort Myers, FL 33919

B. OFFICERS

President: Thomas R. Lochridge

Address: 8192 College Parkway, B41

Fort Myers, FL 33919

Vice President: _____

Address: _____

Secretary: Thomas R. Lochridge

Address: 8192 College Parkway, B41, Fort Myers, FL 33919

Treasurer: _____

Address: _____

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

13.  _____
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.817.155, F.S.

14. Thomas R. Lochridge, President/Director

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

FEB 28 2011

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RKA INTEGRATED SYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2011.

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SECRETARY OF STATE
DELAWARE

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You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8574991

DATE: 02-22-11