# F22000001139

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SECRETARY OF STATE TALL AHASSEE, FLORIDA

2022 FEB | L AM | 1: 2

### **COVER LETTER**

	istration Section ision of Corporations			
SUBJECT	BHMG Service Corporation			
300000		corporation	- must include suffix	
Dear Sir or i	Madam:			
"Certificate	d "Application by Foreign Corp of Existence," or "Certificate of enced foreign.æorporation to tran	Good Stan	ding" and check are subn	
Please retur	n all correspondence concerning	this matter	to the following:	
Leslie Hoff				
		Name of I	Person	
BHMG Serv	ice Corporation			
·		Firm/Com	pany	
630 Jeffco B	lvd			
		Addre	ess	
Arnold, MO	63010			
		City/State a	nd Zip code	· · · · · · · · · · · · · · · · · · ·
lhoff@blung				
	E-mail address: (	to be used f	or future annual report no	otification)
For further i	information concerning this mat	ter, please c	all:	
Leslie Hoff	at	636	333-3912	
Na	me of Person	Area Code	Daytime Teleph	one Number
Reg Div The 241	REET/COURIER ADDRESS: gistration Section ision of Corporations: Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, FL 32303		MAILING AD Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations
	a check for the following amount check payable to: FLORIDA DEP illing Fee	ARTMENT Fee &	OF STATE ] \$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.

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	•	name adopted for the purpose of transacting	
/C- ·		3. 43-1654943 (FEI number, if appli	
07/20/1002			
V1/30/1993	0.	5. (Date of duration, if other tha	
(Date	of incorporation)	(Date of duration, if other tha	in perpetual)
30 Jeffco Blvd,		ness in Florida, if prior to registration) 507.1502, F.S., to determine penalty liability	)
-		al office street address)	
<del></del>	(Current 1	mailing address, if different)	
		•	
Name and <u>stree</u>	<u>t address</u> of Florida registered agent:	•	
Name and <u>stree</u> Name:		•	
Name:	<u>t address</u> of Florida registered agent:	•	
	t address of Florida registered agent:  Corporation Service Company  1201 Hays Street	(P.O. Box <u>NOT</u> acceptable)	2022 SE( !AL!
Name:	t address of Florida registered agent:  Corporation Service Company  1201 Hays Street	(P.O. Box <u>NOT</u> acceptable) , Florida 32301	<b>2022 F.E</b> SECRE TALL AH
Name: īce Address:	Corporation Service Company  1201 Hays Street  Tallahassee  (City)	(P.O. Box <u>NOT</u> acceptable)	SECRETAR FALL AHASS
Name: ice Address: Registered ago	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: end as registered agent and to accept	(P.O. Box NOT acceptable) , Florida 32301 (Zip code)	SECRETARY OF TALL AHASSEES
Name: ice Address; Registered age ing been nam ignated in this	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: ed as registered agent and to accept application, I hereby accept the application.	(P.O. Box NOT acceptable) , Florida 32301 (Zip code)  service of process for the above stated continuous as registered agent and agrees	orporalionat the plate of the p
Name: ice Address; Registered ago ving been nam ignated in this ther agree to c	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: ed as registered agent and to accept application, I hereby accept the application.	(P.O. Box NOT acceptable)  The initial state of the state	orporalionat the plate of the p

10. 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.

#### A. DIRECTORS Verbal Blakey Name: \_\_\_\_ Lukas Pirok Name: □ Chairman □ Chairman 630 Jeffco Blvd 630 Jeffeo Blvd Address: Address: □ Vice Chairman □ Vice Chairman Arnold, MO 63010 Arnold, MO 63010 Director ■ Director President □President □Vice President ■ Vice President ☐Treasurer ■ Treasurer ☐ Secretary □ Secretary ☐ Other \_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ Name: \_\_\_\_\_Ryan Eilers Name: Charles Fiessinger ☐ Chairman □ Chairman 630 Jeffco Blvd 630 Jeffco Blvd Address: □Vice Chairman Address: □Vice Chairman Arnold, MO 63010 Amold, MO 63010 ■ Director ■ Director President President ■ Vice President ☐Vice President ☐Treasurer ☐ Treasurer ☐ Secretary ■ Secretary ■Other \_\_\_\_\_Asst Treasurer □Other \_\_\_\_\_ ☐Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ Name: Jason Jackson □ Chairman □Chairman Name: \_\_\_\_\_ ☐ Vice Chairman Address: \_\_\_\_\_630 Jeffco Blvd □Vice Chairman Address: Arnold, MO 63010 **■** Director □Director □President □ President □ Vice President ☐ Vice President □ Secretary □Treasurer ☐Treasurer □ Secretary Other Asst Secretary □Other □Other \_\_\_\_\_ □Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Malen Day Bankery-Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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.

Executive Vice President/Treasurer

## STATE OF MISSOURI



#### John R. Ashcroft Secretary of State

## CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

### BHMG SERVICE CORPORATION 00384005

was created under the laws of this State on the 30th day of July, 1993, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 7th day of February, 2022.

Secretary of State

Certification Number: CERT-02072022-0028

