Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future:
annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

022 APR -8 PH 2: 3

9 APR-8 PH 3: 2

## FOREIGN PROFIT/NONPROFIT CORPORATION

## Outdoor Connection, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

DocuSign Envelope ID: CDAB7877-B6D3-4AFA-A884-69C8F3424E01

## 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.

	Outdoor Connection, Inc.					
	orporation, must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION	I,"			
OC Florida, Inc.						
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
Minnesota	country under the law of which it is incorporated)  (FEI number, if applicable)					
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap	plicable)			
April 14, 1989						
(Date	April 14, 1989  [Date of incorporation]  [Date of duration, if other than perpetual]		han perpetual)			
. n·a						
·	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		ıy)			
, 2619 Hickory Lai	ne, Emporia, KS 66801					
	(Principal office	street address)				
	·					
· · · · · · · · · · · · · · · · · · ·	(Current mailing of	iddress, if different)				
	_					
3. Name and stree	et address of Florida registered agent: (P.O. I	3ox <u>NOT</u> acceptable)	75. <b>20</b>			
Name:	C T Corporation System	<b>_</b> -	2022 APR SECRETATALL AHA			
Office Address:	1200 South Pine Island Road		- 26 上 亡			
	Plantation	. Florida 33524 (Zip code)	B PM 2: 35			
	(City)	(Zip code)				
Registered and	ent's acceptance:		7. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.			
laving been nam lesignated in this urther agree to c	wed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes related with and accept the obligations of my positions.	nt as registered agent and agre utive to the proper and complet	l corporation at the place ve to act in this capacity. I			
Stephan	e Honey Stephanie Hencz Assista	nt Secretary				
	(Registered agent's sign	ature)				

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.

To: +18506176383 Page: 4 of 5 2022-04-08 08:37:15 PDT 19548277645 From: Kaity Toon

DocuSign Envelope ID: CDAB7877-86D3-4AFA-A884-69C8F3424E01
A DIRECTORS

□Chairman □Vice Chairman □Director ■President □Vice President □Secretary □Other	Emporia, KS 66801	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	Name; Address.  Treasurer  Other		
□Director □President	Name:	Director Director President Svice President Secretary	□Treasurer		
□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	ਹੈTreasurer	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	□Treasurer		
Important Notice. Use an attachment to report more than six (6) The attachment will be imaged for reporting purposes only. Non-indexed indiverse of State Annual Report form.    Mark					

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 5,817,155, F.S.

To: ~18506176383 Page: 5 of 5 2022-04-08 08:37:15 PDT 19548277645 From: Keity Toon

## Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Outdoor Connection, Inc.

Date Filed: 04/14/1989

File Number: 6H-21

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 04/06/2022

OF THE STATE OF TH

Steve Simon
Secretary of State
State of Minnesota