

F230000005207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

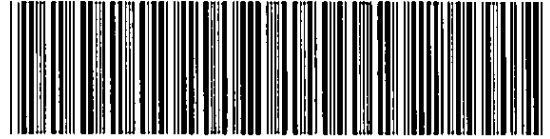
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000415236550

FILED

2023 SEP 12 AM 9:42

OFFICE OF STATE
TALLAHASSEE, FL

RECEIVED

2023 SEP 12 PM 1:29

OFFICE OF STATE
TALLAHASSEE, FLORIDA

CT CORP
(850) 656- 4724
3558 lakesore Drive
Tallahassee, FL 32312

Date: 09/12/2023

Acc#I20160000072

eric DW

Name:	STAMPEDE VENTURES, INC.
Document #:	
Order #:	15124175 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

licensure@beringstraits.com

Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____
 Ref# _____

Amount: \$ **78.75**

Thank you!

**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. Stampede Ventures, 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. Alaska 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/27/1992 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 09/08/2023
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S.. to determine penalty liability)

7. 110 Front Street, Suite 300, Nome, AK 99762
(Principal office street address)

3301 C Street, Suite 400, Anchorage, AK 99503-3958
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation Florida 33324
(City) (Zip code)

9. 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.

Stephanie Hencz Stephanie Hencz - Assistant
Secretary
(Registered agent's signature)

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

FILED
2023 SEP 12 AM 8:42
STATE OF FLORIDA
TALLAHASSEE

A. DIRECTORS

Chairman Name: Cynthia Massie
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Z. Daniel Graham
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____


Chairman Name: Kimberly Cunningham
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other VP-Finance Other _____

Chairman Name: Ella Anagick
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Larry Pederson
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Krystal Nelson
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other VP-Operations 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.

12. 
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.

13. Z. Daniel Graham, President
(Typed or printed name and capacity of person signing application)

A. DIRECTORS

Chairman Name: Douglas Smith
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other Senior VP Other _____

Chairman Name: Charles Fagerstrom
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Gail R. Schubert
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Jason Evans
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Stephan Ivanoff
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Frederick Sagoonick
 Vice Chairman Address: _____
 Director 3301 C Street, Suite 400
 President Anchorage, AK 99503
 Vice President _____
 Secretary Treasurer
 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.

12. _____
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.

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

Alaska Entity #49513D

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

STAMPEDE VENTURES, INC.

This entity was formed on April 27, 1992 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective July 6, 2023.

A handwritten signature in black ink, appearing to read "Julie Sande".

Julie Sande
Commissioner