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PICK-UP	WAIT	MAIL
((Business Entity Name)	
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(Document Number)	
Certified Copies	Certificates of Statu	IS
Special Instructions	to Filing Officer:	
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L. SELLERS		

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COVER LETTER

TO:

Registration Section

Division of Corporations					
SURJECT. Wallace Architects, LLC					
Name of Limited Liability Company					
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida					
Please return all correspondence concerning this matter to the following:					
Tami L Green					
Name of Person					
Wallace Architects, LLC					
Firm/Company					
120 South Limit Avenue					
Address					
Sedalia, MO 65301					
City/State and Zip Code					
tamig@wallacearchitects.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Tami Green at (660) 826-7000					
Name of Person Area Code & Daytime Telephone Number					
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
Enclosed is a check for the following amount: \$\sum_{125.00 \text{ Filing Fee}} \text{\$\sum_{130.00 \text{ Filing Fee}} & \$\sum_{Certificate} \text{\$\sum_{Certificate} \text{ Certified Copy}} \tag{\$\sum_{S160.00 \text{ Filing Fee}} & \$\sum_{S160.00 \text{ Filing Fee}} & \sum_{S160.00 \text{ Filing Fee}} & \text{\$\sum_{S160.00 \text{ Filing Fee}} & \sum_{S160.00 \text{ Filing Fee}} & \text{\$\sum_{S160.00 \text{ Filing Fee}} & \$\sum_{S160.00 \tex					

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Wallace Archictects, LLC.		
••	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-	
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C," "LLC.")		
	Missouri 3. 43-1802526		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4	December 15, 1997 5. December 31, 2046		
٠,	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•	
6.	Upon Qualification		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	•	
7.	120 South Limit Avenue	•	
	Sedalia, Mo 65301		
	(Street Address of Principal Office)	•	
8.	If limited liability company is a manager-managed company, check here		
9.	The name and usual business addresses of the managing members or managers are as follows:		
	William Kurt Wallace		
10.	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec	ords in	
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under eath of the translator must be submitted.)		
	,		
11	. Nature of business or purposes to be conducted or promoted in Florida: Architecture Services		
	Ment Vrallace	n	
	Signature of a member or an authorized representative of a member.		
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in		
	about to the Department of State constitutes a unite degree ferony as provided for in 3.61 (22), 1.54	J	
	Kurt Wallace BA &		= :
	Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Wallace Architects, LLC	_
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	•
NRAI Services, Inc.	
(Name)	
515 East Park Avenue	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301	
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registe agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. NRAI Services, Inc. By: Jessica Metzger, Assistant Secretary (Signature) \$ 100.00 Filing Fee for Application	red

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

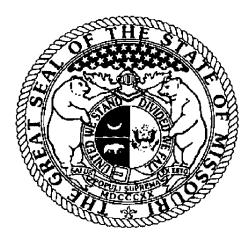
WALLACE ARCHITECTS, LLC LC0016459

was created under the laws of this State on the 15th day of December, 1997, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 16th day of October, 2012

n Camahan

Secretary of State



Certification Number: 14985659-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp