## 

To: Registration S Division of C		<u>-</u> .			
SUBJECT: F	WD. Inc.				
	(Name of corp	oration - must include s	suffix)		
Dear Sir or Madam:					
The enclosed "Applicate of Existentransact business in Fl	ation by Foreign Corporation ce", and check are submitted orida.	n for Authorization to led to register the above a	Fransact Busine referenced forei	ss in Florida", gn corporation t	О
Please return all corres	spondence concerning this n	natter to the following:			
$\mathbb{R}$	wland Kieff	er		OO SE	
	) (Na	me of Person)			
F	WD Inc.			SSA A I	<u>-</u>
	(Fin	m/Company)	= -		П. <u>.</u>
lok	Batesville R	dud.		FI OS	7
		(Address)			
Bo	tesville AR	72501	÷	+	_
- 1.1	(Cit	y/State/Zip)		- 410h	n Lin
			900003	2290929	] -}
Should you need to cal	I someone concerning this i	natter, please call:	-04/2	4/0001123- *87.50 ****	-00 00
Ryland K	rieffer at (8"	70 702-0	Har Har		
Name of Per	·—·	Area Code & Daytime	Telephone Num	<u> </u>	15
(114410 01 1 01	(	Alca Code & Daylinie	reichnone Mun	idei)	
STREET ADDRESS:		MAILING ADI	DFSS.		
		WHILE TO ADE	ALBB.		
Registration Section Division of Corporation	ns	Registration Sect Division of Corp			.=
409 E. Gaines St.		P.O. Box 6327			
Tallahassee, FL 32399	1	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	& <b>X</b> \$87.:	50 Filing Fee,	



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 28, 2000

RYLAND KIEFFER FWD, INC. 66 BATESVILLE BLVD. BATESVILLE, AR 72501

SUBJECT: FWD, INC.

Ref. Number: W00000011243

We have received your document for FWD, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 900A00023388

## RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

I, the undersigned	Phillip Pulley (Name)	, do hereby certify	· •
that this Resolution of the	e Board of Directors of		. <u></u>
	FWD, IN	ο <u>ς .</u>	<del></del>
a corporation duly organ	ized and existing under the la	ws of the State of Allawas	
was duly adopted on	OCTOBER	20 1098	"
	FWD.7 (Corporate	Name) [11]	 <u></u> _
organized and existing in	the State of ARKANSA	hereby adopts the name	
FIREW	orks world D, I	ως for use in Florida.	
Dated: May 5 2000	21.0000 00		-
Signa	ature of either Chairman, Vice Chai	man or any officer	
	Phillip Pulley Type or print Name		<u>.du<del>r (</del>ro</u> la)

INHS19(1/00)

#### 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 FWD Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Ar Kansas  (State or country under the law of which it is incorporated)  3. 11-0817274  (FEI number, if applicable)
4. October 1, 1998 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. June 1998
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. Ub Batesville Blud. Batesville AR 72501 (Principal office address)
6. Lde Batesville Blud. Batesville AR 7250128
(Current mailing address)
8. <u>Betail Fireworks</u>
(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 or Mail Drop Box NOT acceptable)
Name: _ DAVID BROGGON
Office Address: 4347 70 UNIVERSITY BLUD SOUTH
JAKKSOWJILLE , Florida 32116 (Zip code)
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)
1. 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. Nam	es and business addresses of officers and/or directors:	
A. DIRI	CCTORS	
Chairma	1;	
Address:		_
Vice Cha	irman:	
Address:		
Director:		·
Address:		. •
		45
Director:		
Address:		
B. OFF	ICERS	
President:		
Address:	500 Newport Rd., Batesville, AR 7250 =	
Vice Presi		- ÷ - _
Address:	5406 W. Main, Newport, AR 72112 3	
Secretary:		<b>-</b> ·
Address:		
-		
Treasurer:		- <b>-</b> -
Address: _		
-		
NOTE:	f necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. P	hillip Pulley President	
14	(Typed or printed name and capacity of person signing application)	-



#### State of Arkansas SECRETARY OF STATE



# OF A DOMESTIC CORPORATION

I, Sharon Priest, Secretary of State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

FWD, INC.

1998.	X.I.	0	
I further certify that as far as the records show, this corporation is at this time charte standing, having met all the requirements governing a domestic corporation in this State.		in go	ood
In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal. D he City of Little Rock, Arkansas this 20th day of April 2000.	JF STAT	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	fice in
Sharon Priest, Secretary of State	<del></del>		
by: DE Morrow	C-2/I	Rev 10-	1_89
D E MOITOW	<b>U</b> -µi)	10-	1-00

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation October 1,