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(Ke	questor's Name)	
		- <u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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☐ PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
0	FIT Office	-
Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE

J DEN.

DEC 0 5 2022

### **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	BLUE BEACON, INC.	
SUBJI	Name of	f Corporation
DOCU	JMENT NUMBER: F00000002686	
The en	nclosed Amendment and fee are submitt	ted for filing.
Please	return all correspondence concerning to	his matter to the following:
BRIDG	ET PEARCY	
	Name of Contact Person	<del></del>
BLUE I	BEACON, INC.	
	Firm/Company	
РО ВО	X 856	
	Address	<del></del>
SALIN.	A, KS 67402	
	City/State and Zip Code	
	p@bluebeacon.com	
E-	-mail address: (to be used for future annual	report notification)
For fu	rther information concerning this matter	r, please call:
BRIDG	ET PEARCY	785 825-2221 at ( )
	Name of Contact Person	at (
Enclos	sed is a check for the following amount:	:
	\$35.00 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## NOT FOR PROFIT CORPORATION - APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA

(Pursuant to s. 617.1504, F.S.)

### SECTION I (1-3 MUST BE COMPLETED)

F00000	002686
<del></del>	(Document Number of Corporation (If known)
1 BLUE BEACON INTERNATIONAL, IN	4C
(Name of corpo	oration as it appears on the records of the Department of State)
2. KANSAS	3 06/06/2010
(Incorporated under laws of)	3. 06/06/2010 (Date authorized to conduct affairs in Florida)
	SECTION II
(4-8 C	OMPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the national jurisdiction of incorporation? 08/09/	me of the corporation, when was the change effected under the laws of its
	es not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Departmen	nt of State's records.
5 BLUE BEACON, INC.	
	it, adding suffix "corporation," or "incorporated," or appropriate abbreviation, ration. "Company," or "Co.," may not be used as a corporate suffix by a nonprofit
6. If the amendment changes the peri effected.	od of duration, indicate new period of duration and the date the change was
(New duration)	(Date)
7. If the amendment changes the jurwas effected.	risdiction of incorporation, indicate new jurisdiction and the date the change
(New jurisdiction)	(Date)
8. If the purpose which the corporation	on intends to pursue in Florida has changed, indicate new purpose.
(The corporation is author	rized to pursue such purpose in the jurisdiction of its incorporation)
9. Attached is a certificate or documen 90 days prior to delivery of the appl having custody of corporate records	at of similar import, evidencing the amendment, authenticated not more than lication to the Department of State, by the Secretary of State or other officials in the jurisdiction under the laws of which it is incorporated.
(Signature of the ch if in the hands of a	airman or vice chairman of the board, president, or other officer – receiver, trustee, or other court-appointed fiduciary, by that fiduciary)
CHARLES TUTTLE	TREASURER

(Title of person signing)

(Typed or printed name of the person signing)

#### STATE OF KANSAS OFFICE OF SECRETARY OF STATE SCOTT SCHWAB

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 0457572

Entity Name: BLUE BEACON, INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

was filed in this office on September 07, 1976, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of August 03, 2022

SCOTT SCHWAB SECRETARY OF STATE

Certificate ID: 1230428 - To verify the validity of this certificate please visit <a href="https://www.kansas.gov/bess/flow/yalidate">https://www.kansas.gov/bess/flow/yalidate</a> and enter the certificate ID number.