# F000000000633

To: Registration Section Division of Corporations	
SUBJECT: Wencor West, Inc.	
	orporation - must include suffix)
The enclosed "Application by Foreign Corpora	tion for Authorization to Transact Business in Florida", itted to register the above referenced foreign corporation to
Please return all correspondence concerning the	is matter to the following:
Dennis R. Larsen	
(	Name of Person)
Wencor West, Inc.	
	Firm/Company) W- 24693
P.O. Box 514	W- 0701
	(Address) 40000341505410/05/0001074010
	*****87.50 *****87.50
Springville, Utah	84663-0514 (City/State/Zip)
Should you need to call someone concerning the	nis matter, please call:
Dennis R. Larsen at (	801 ) 489-2004
(Name of Person)	(Area Code & Daytime Telephone Number)
	O NOV
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section  Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee Certificate of Sta	<del>-</del>



## FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

October 12, 2000

DENNIS R. LARSEN WENCOR WEST, INC. P.O. BOX 514 SPRINGVILLE, UT 84663-0514

SUBJECT: WENCOR WEST, INC. Ref. Number: W00000024693

We have received your document for WENCOR WEST, 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:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 400A00053796

# 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.	Wencor W	West, Inc.								
	(Name of corp	oration; must include the word "	INCORPO	RATED", "	COMPANY	r", "CORPORATIO	N" 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.				_ 3	<u>87–0316</u>					
	(State or count	ry under the law of which it is in	corporated)	)	(	FEI number, if appl	licable)			
	10/10/75	<u>-</u>	_	perpetua	1					
4.	10/10/75	ate of incorporation)	>			. will cease to exist	or (homota	~122\		
	(D	ne of meorporation)		(Dinanon:	rear corp	. Will cease to exist	or perpetu	aı j		
6.	upon qua	alification								
		sacted business in Florida. If con	poration h	as not transa	cted busine	ss in Florida, insert	"upon quali	ificati	on.")	
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)										
		·				ŕ				
7.	a. 1625 N.	Mountain Springs Park	way Sp	ringvill	e, Utah	84663				
(Principal office address)										
	_									
	b. P.O. Box								_	
		(Curr	ent mailing	g address)						
		•								
8.	Any and	all lawful business								
٠.		e(s) of corporation authorized in	home state	or country t	o be carrie	d out in state of Flo	rida)			
	( <b>F</b>	, (-), <u>-</u>						0	SINI	
9.	Name and st	<u>reet address</u> of Florida regis	tered age	nt: (P.O. B	ox or Mai	il Drop Box NOT	acceptable	12 AON 00	1 <u>SS</u>	
		_	-	•			-	<b>1</b> 0	오줌 -	
	Name:	Cletis Holden						2	吊艺士	
									83F	
Oi	ffice Address:	3701 N.W. 66th Ave.						PM 2:	350	
								~~	စ္တင္ဆ	
		Miami		, ]	Florida 33	3166		·.¥		
						Zip code)		ထ	2'''	
					`	1			C)	
10	. Registered	agent's acceptance:								
	· ·	•								
H	zving been nam	ed as registered agent and to ac	cent servic	e of process	for the abo	ove stated cornorati	ion at the nl	ace d	esionated	
in	this application	, I hereby accept the appointme	ent as regis	téred agout	and agree i	to act in this capaci	itv. I furthe	r agr	ee to	
co	mply with the p	provisions of all statutes relative	to the prof	per and com	plete perfoi	rmance of my dutie	s, and I am	fami	liar with	
an	d accept the ob	ligations of my position as fegis	tered agen					•		
		11/1/5	SADA	Men						
		1 1112/	100	V	-	<del></del> .			-	
		/ a (Regi:	stered agen	t's signature	)					
		certificate of existence duly auti								
De	epartment of Sta	ite, by the Secretary of State or o	other officia	al having cus	stody of con	rporate records in th	ie jurisdictio	n unc	ier the law	

of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS \_\_\_\_\_ Chairman: \_ J. Brent Wood Address: P.O. Box 514 Springville, Utah 84663-0514 Vice Chairman: Address: Director: William T. Gaston Address: P.O. Box 514 Springville, Utah 84663-0514 Director: Dennis R. Larsen Address: P.O. Box 514 Springville, Utah 84663-0514 B. OFFICERS President: J. Brent Wood Address: \_\_ P.O. Box 514 Springville, Utah 84663-0514 Vice President: see attached list Address: \_ Secretary: \_\_\_ Dennis R. Larsen Address: P.O. Box 514 Springville, Utah 84663-0514 Treasurer: Dennis R. Larsen Address: P.O. Box 514 Springville, Útah 84663-0514 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Secretary/Treasurer/Director 14. <u>Dennis R. Larsen</u>

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

Addendum to Application for Wencor West, Inc. FEI 87-0316090

B. Officers

Vice Presidents:

Kathryn P. Wood P.O. Box 514 Springville, Utah 84663-0514

William T. Gaston P.O. Box 514 Springville, Utah 84663-0514

Russ Adamson P.O. Box 514 Springville, Utah 84663-0514

Richard Ballantyne P.O. Box 514 Springville, Utah 84663-0514



DENNIS LARSEN
WENCOR WEST INC
PO BOX 514
SPRINGVILLE UT 84663

#### Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438
Web site: http://www.commerce.state.ut.us

November 3, 2000

## **CERTIFICATE OF EXISTENCE**

**Registration Number:** 

657090-0142

**Business Name:** 

WENCOR WEST, INC.

Registered Date:

OCTOBER 10, 1975

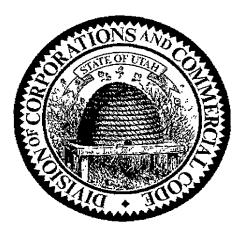
Foreign or Domestic:

**DOMESTIC** 

**Current Status:** 

GOOD STANDING

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah.



Lorena Riffo-Jenson Division Director of

Corporations and Commercial Code

Dept. of Professional Licensing (801) 530-6628

Real Estate (801) 530-6747

Public Utilities (801) 530-6651

Securities (801) 530-6600 Consumer Protection (801) 530-6601