

F01000002989

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Four-T Corporation
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

800004221508--9
-05/17/01--01014--009
*****78.75 *****78.75

KEITH THOMAS
(Name of Person)

Four-T Corporation
(Firm/Company)

NO1-11421

4969 'F' STREET
(Address)

OMAHA NEBRASKA 68117
(City/State and Zip code)

For further information concerning this matter, please call:

KEITH THOMAS at (402) 339-1032
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE FLORIDA

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
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 Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

EP



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

May 18, 2001

KEITH THOMAS
FOUR-T CORPORATION
4969 "F" STREET
OMAHA, NE 68117

SUBJECT: FOUR-T CORPORATION
Ref. Number: W01000011421

We have received your document for FOUR-T CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 301A00030000

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. FOUR-T CORPORATION
(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. NEBRASKA 3. 91-1814899
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 7, 1997 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(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. 4969 'F' Street OMAHA, NEBRASKA 68117
(Principal office address)

(Current mailing address)

8. Wholesale Cigarettes and Tobacco Product to Retail Stores
(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: NRAT Services, Inc.

Office Address: 526 E. Park Ave.

Tallahassee, Florida 32301
(City) (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.

 Asst-Secretary of NRAT Services, Inc.
(Registered agent's signature)

11. 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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

B. OFFICERS

President: Keith B Thomas

Address: 7990 Hidden Valley Dr
Papillion NEBRASKA 68046

Vice President: N/A

Address: _____

Secretary: Patricia Thomas

Address: 7990 Hidden Valley Dr
Papillion NE 68046

Treasurer: N/A

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Keith B Thomas

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

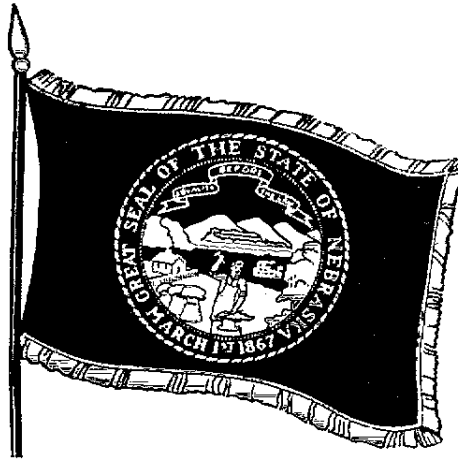
14. Keith B Thomas PRESIDENT

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

STATE OF

NEBRASKA

United States of America,
State of Nebraska } ss.



Department of State
Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

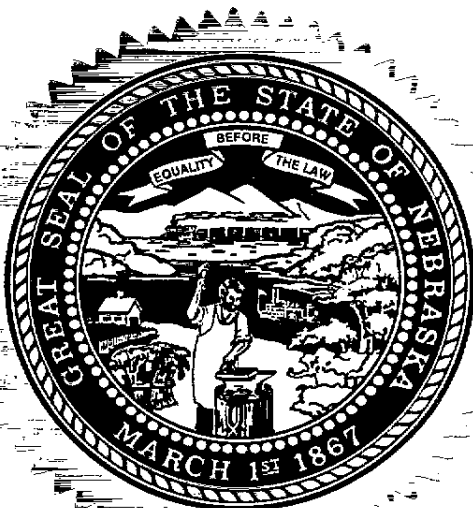
FOUR-T CORPORATION

was duly incorporated under the laws of this state on April 9, 1997 and do further certify that no occupation taxes assessed are unpaid and no annual reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

In Testimony Whereof,

I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on March 28, in the year of our Lord, two thousand one.

John A. Gale
SECRETARY OF STATE



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TALLAHASSEE FLORIDA