

CT CORPORATION

# F020006001310

CORPORATION(S) NAME

QSHGP, Inc.

FILED  
MAR 15 PM 2:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

800005110998--3  
-03/15/02--01039--006  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

BK

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

3/15/02

**FILE SECOND**

Order#: 5191680

Ref#:

Amount: \$ \_\_\_\_\_

RECEIVED  
MAR 15 PM 2:09  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

# 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. QSHGP, 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. Texas

(State or country under the law of which it is incorporated)

3. 75-2341787

(FEI number, if applicable)

4. 8/24/90

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 5810 E. Skelly Dr., Ste 1650

Tulsa, OK 74135

(Current mailing address)

8. Transact any or all lawful business for which corporations may be  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) incorporated

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324

(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.

CT Corporation System

(Registered agent's signature) John S. Linnihan, Asst. VP

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,

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**Chairman: Phyllis S. HojelAddress: 5810 E. Skelly Dr., Ste 1650  
Tulsa, OK 74135

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Phyllis S. HojelAddress: 5810 E. Skelly Dr., Ste 1650  
Tulsa, OK 74135

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**President: Phyllis S. HojelAddress: 5810 E. Skelly Dr., Ste 1650  
Tulsa, OK 74135Chairman  
Vice President: Richard C. HojelAddress: 5810 E. Skelly Dr., Ste 1650  
Tulsa, OK 74135Secretary: Tamara RainsAddress: 5810 E. Skelly Dr., Ste 1650  
Tulsa, OK 74135

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If 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. Tamara Rains, Secretary  
(Typed or printed name and capacity of person signing application)FILED  
02 MAR 15 PM 2:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697



Gwyn Shea  
Secretary of State

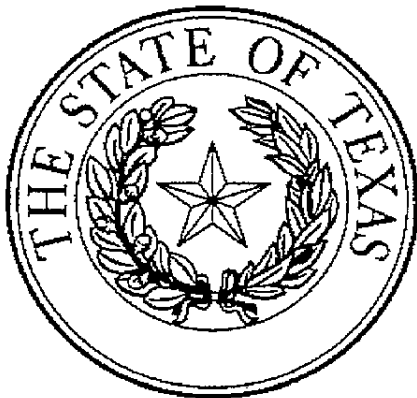
## Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for QSHGP, INC. (filing number: 116399700), a Domestic Business Corporation, was filed in this office on August 24, 1990.

It is further certified that the entity status in Texas is active.

FILED  
MAR 15 PM 2:43  
SECRETARY OF STATE  
TAMPA, FLORIDA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 08, 2002.



*Gwyn Shea*

Gwyn Shea  
Secretary of State