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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonex Southeast, Inc.

(Name of Corporation - must include suffix)

FILED
02 SEP 16 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

J.B. Conant

(Name of Person)

Sonex Southeast, Inc.

(Firm/Company)

P.O. Box 6348

(Address)

900007770209--1
-09/16/02--01058--019
*****70.00 *****70.00

Pearl, MS 39288

(City, State and Zip Code)

For further information concerning this matter, please call:

Mr. Bob Collins

(Name of Person)

at (601) 932-2060

(Area Code & Daytime Telephone Number)

Name	
STREET ADDRESS:	
Registration Section	
Division of Corporations	
409 E. Gaines St.	DCC
Tallahassee, FL 32399	
Updater	DCC
Enclosed is a check for the following amount:	
Verifier	DCC
<input checked="" type="checkbox"/> \$70.00 Filing Fee DCC	
P. Verifier DCC	

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

FO20000004729

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. Sonex Southeast, Inc.

(Name of corporation: must include the word "INCORPORATED" or "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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Mississippi

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

3. 64-0947891

(FEI number, if applicable)

4. November 5, 2001

(Date of Incorporation)

5. Perpetual

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

6. Upon qualification

(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.1503.)

7. 3075 East Fairway Drive, Brandon, MS 39047

(Principal office address)

P.O. Box 6348, Pearl, MS 39288

(Current mailing address)

8. Sonar measurement

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

(City)

, 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.

see attached

(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.

**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned corporation authorized under the laws of the state of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

1. The name of the corporation is: SONEX SOUTHEAST, INC.
2. The name and address of the registered agent and office is C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

Having been named as registered agent and to accept service of process for the above stated corporation on the place designated in this certificate, I hereby accept the appointment as registered agent and agree in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


J L Miles Assistant Secretary

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Richard Vanek

Address: P.O. Box 752

Mandeville, LA 70470

Director: J.B. Conant

Address: 3075 East Fairway Drive

Brandon, MS 3947

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Richard Vanek

Address: P.O. Box 752

Mandeville, LA 70470

Vice President: _____

Address: _____

Secretary: J.B. Conant

Address: 3075 East Fairway Drive, Brandon, MS 39047

Treasurer: J.B. Conant

Address: 3075 East Fairway Drive, Brandon, MS 39047

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. J.B. Conant
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. J.B. Conant - Secretary
(Typed or printed name and capacity of person signing application)

State of Mississippi

Secretary of State's Office

Eric Clark

Secretary of State
Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on November 05, 2001 the state of Mississippi issued Charter/Certificate of Authority to:

SONEX SOUTHEAST, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is Perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand
and seal of office
July 10, 2002

Eric Clark

ERIC CLARK,
Secretary of State



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA