# F02000005360

(Requestor's Name)					
(Address)					
(Ac	idress)				
(City/State/Zip/Phone #)					
PICK-UP	v	VAIT MAIL			
(Business Entity Name)					
(Do	ocument l	Number)			
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
Name	-				
Availabilit <b>y</b>					
Decument Examiner	DCC				
Updater	DCC	Use Only			
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### TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Kitter man Mail 7 (Name of corporati	Transport Inc.
(Name of corporati	on - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.	
Please return all correspondence concerning this matter	er to the following:
Charles M. Mooney (Name o	SR f Person)
Mooney Law firm	pmpany)
(Add	ress)
P.O. Boy 1423 (Add  Jonesboro, AR 7 (City/State	2403
(City/State	and Zip code)
For further information concerning this matter, please	SECRETY TALLAHA:
Shirley Collins at (870	) 935,5847 SER 2 F
Shivley Collins at (870 (Area	Code & Daytime Telephone Number) FLORIDA  MAILING ADDRESS:
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	3 \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy

## 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.	KITTERMAN MAIL TRANSPORT, 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 latural person or partnership if not so contained in the name at present.)	
2.	STATE OF ARKANSAS 3	
	State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	AUGUST 5, 2002 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.	4205 East Nettleton, Jonesboro, AR 72401	
	(Principal office address)	
	P.O. Box 5022, Jonesboro, AR 72403	
	(Current mailing address)	
8.	To engage in the operation of contracting with the U.S. Postal Service to transport mail	
	(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: Berry Kitterman	ij
Ο.	ice Address:112_Oak_Lane	Ų
	Ormond Beach , Florida 32174	3

#### i0. 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.

(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.

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

#### A. DIRECTORS

Chairman: _	Robert Mace Kitterman (and sole director)	
Address:	4205 East Nettleton, Jonesboro, AR 72401	
Vice Chairn	an:	
Address:		
— Director: _	•	
Address:		
Director: _		
Address:		·
B. OFFIC	ERS	02 SE TAL
President: _	Robert Mace Kitterman	CRE 0
Address:	4205 East Nettleton, Jonesboro, AR 72401	F(1) - 1
Vice Preside	nt:	OF STATE
		50 50
— Secretary: _	Robert Mace Kitterman	
Address:	4205 East Nettleton, Jonesboro, AR 72401	-
Treasurer: _	Robert Mace Kitterman	
Address:	4205 East Nettleton, Jonesboro, AR 72401	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers	and/or directors.
13	Nobert Mace Litterin	1
•	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of t	ne application)
14	Robert Mace Kitterman, President (Typed or printed name and capacity of person signing application)	