

F03000003207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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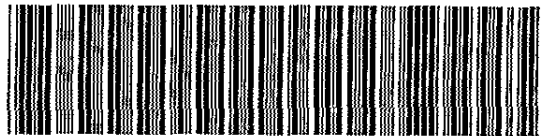
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GATEWAY CAPITAL MANAGEMENT, INC.
(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:

William F. Holden
(Name of Person)
Gateway Capital Management, Inc.
(Firm/Company)
20 S. Central Avenue, Suite 106, St. Louis, MO 63105
(Address)
St. Louis, MO 63105
(City/State and Zip code)

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For further information concerning this matter, please call:

William F. Holden at (314) 503-4332
(Name of Person) (Area Code & Daytime Telephone Number)

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

**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. GATEWAY CAPITAL MANAGEMENT, 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. MISSOURI 3. 43-1922942
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 18, 2001 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. 20 S. Central Avenue, Suite 106, St. Louis, MO 63105
(Principal office address)

20 S. Central Avenue, Suite 106, St. Louis, MO 63105
(Current mailing address)

8. Financial Services & Mortgage Services
(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: _____ *See Attached

Office Address: _____

_____, Florida _____
(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.

*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.

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

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: Gateway Capital Management, Inc.
2. The name and street address of the registered agent and office is: Florida & Offshore Business Formation, Inc., 20 S. Broad Street, Brooksville, FL 34601

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF THE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 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.


Alan Teegardin

For and on behalf of Florida & Offshore
Business Formation, Inc.

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

A. DIRECTORS

Chairman: William F. Holden

Address: 7 N. Covington Meadow Road

St. Louis, MO 63132

Vice Chairman: Susan Cox Holden

Address: 7 N. Covington Meadow Road

St. Louis, MO 63132

Director: Wayne B. Cox

Address: 10 Celest Court

Belleville, IL 62223

Director: _____

Address: _____

B. OFFICERS

President: William F. Holden

Address: 7 N. Covington Meadow Road

St. Louis, MO 63132

Vice President: William F. Holden

Address: _____

Secretary: Susan Cox Holden

Address: 7 N. Covington Meadow Road

Treasurer: St. Louis, MO 63132

Address: Treasurer = William F. Holden

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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. _____

William F. Holden

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

STATE OF MISSOURI



Matt Blunt
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

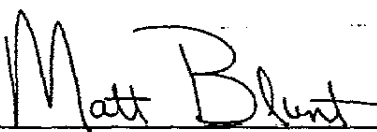
I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

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was created under the laws of this State on the 18th day of April, 2001, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and an imprinted the GREAT SEAL of the State of Missouri, on this, the 18th day of June, 2003


Secretary of State

