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### TRANSMITTAL LETTER

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SUBJECT:	т	&	Р,	Inc.								
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Dear Sir or M	adam:											
The enclosed "Certificate of transact businesses	Existe	ence'	", and									to
Please return a	ill corr	espo	nden	ce conce	rning this	s matter	to the fol	lowing:				
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Sl	okos	s,	Beç	uette	& Bi	llin	gsley,	P.A.			_	. <del>-</del>
					(F	irm/Co	mpany)				4	
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						(Addr	ess)	<del></del>			至前	7
Li	ttle	≥ R	.ock	, AR	72201						SE SE	5
					(City	//State a	and Zip co	de)		, ,	H. S.	=======================================
For further inf	ormati	on c	oncei	rning this	s matter, <sub>j</sub>	please c	all:				STATE	PH 12: 45
Jay E	Beque	ett	.e		at (	501	374-	1107			•	
	e of Pe							aytime Tel	ephone l	Number)		•
STREET AD Registration S Division of Co 409 E. Gaines Tallahassee, F	ection rporati St.	ions			÷		Registra Division P.O. Bo	NG ADDR tion Section of Corpor x 6327 see, FL 3	on rations			
Enclosed is a c	heck f	or th	e fol	lowing a	mount:							
🗷 \$70.00 Fili:	ng Fee				ing Fee & e of State		\$78.75 F Certified	iling Fee o	&, □	Certific	Filing Fee, rate of Statt	ıs &

#### 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.

l.		T & P	, Inc.	a	<u></u> .			· <u>-</u>			
	(Enter name of "Inc.," "Co.," "C				RATED,	' "COMPAN	VY," "CORP	ORATION,"			
			Sonic,		- 			<u> </u>			
	(If name unavai	ilable in Flor	ida, enter alte	ernate corpor	ate name	adopted for th	he purpose of	transacting b	usiness in Flori	da)	
2.	Arkansa	as		****	<b>3.</b>	20-058	38067			-	,
(	State or country	y under the la	w of which	it is incorpora	ated)		(FEI numb	er, if applica	ble)		
4.	01/13/0	) 4	.a.		. 5.	perpe	etual		·-		
	(Dat	te of incorpor	ation)		_ <del></del>	(Duration:	Year corp. wi	ll cease to ex	ist or "perpetua	J'")	
6.	upon qu	alific	ation			· ·			, , , , , , , , , , , , , , , , , , ,	**	 [
(	Date first transa	acted busines					usiness in Flo ad 817.155, F.		pon qualification	on.")	
7.		263 L	akeview	Road,	Edgen	ont, AF	R 72044		- EŠ		
				(Principal o	ffice addr	ress)			表自		
		263 L	akeview	Road,	Edgem	ont, AF	72044		SSE	<u>.</u>	1.1
-				(Current ma			<del></del>	<u> </u>	<del>.in</del> &		Ö
		_							- S을	<u> </u>	
8.			<u> </u>	<u> </u>				<del></del>	d activi	ties —o	
	(Purpose(	(s) of corpora	tion authoriz	zed in home s	tate or co	untry to be ca	arried out in s	tate of Florida	a)		
9.	Name and <u>str</u>	eet addres:	of Florida	registered	agent: (	P.O. Box or	Mail Drop	Box <u>NOT</u> a	cceptable)		
	Name:	Chad	Jarvis	<u>-</u>		>		* * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·	ر ز مسملیا سازار	
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Of	fice Address:	6025	SW 250	St.		* 1	22 27 1		*	-	•
		Newbe	cry		<u></u>	, Floric	ia 32669	- }			
		_	(City)		_		(Zip co	ie)			

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.

(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:

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Α.	m	RH	I ( )	K.S

Chairman:	Dennis Porter		<del></del>
Address:	263 Lakeview Road		
	Edgamont ND 72044		······································
Vice Chairman:		·	· · · · · · · · · · · · · · · · · · ·
Address.			<u> </u>
Director:			
Address:			<u>ार्</u> ग्य के किया है के
Diseases		The second secon	
	<del></del>		<del></del>
Address:			
B. OFFICERS		SEG: TALLA	
President:	Dennis Porter	HAD AN	· · · · · · · · · · · · · · · · · · ·
Address:	263 Lakeview Road	my on	
	Edgemont, AR 72044	FLOOR IN	<u> </u>
Vice President:	Shawn Downs	2m -	<del></del> :
Address:	263 Lakeview Road		
	Edgemont, AR 72044		· -
Secretary:	Jenny Jones		
Address:	263 Lakeview Road		
Treasurer:	Edgemont, AR 72044		
Address:			
NOTE: If neces	ssary you may attach an addendum to the application	listing additional officers and/or directors.	i v v v
	(Signature of Director or Officer listed in number 12 c	of the application)	<del></del>
14			
	(Typed or printed name and capacity of person	n signing amplication)	•

## **Arkansas Secretary of State Charlie Daniels**

State Capitol Building + Little Rock, Arkansas 72201-1094 + 501.682.3409

### CERTIFICATE OF GOOD STANDING

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

### T & P, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office January 13, 2004.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 13th day of January 2004.

Charlie Daniels Secretary of State

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