# F0400000a6aa

| (Requestor's Name)      |             |                |             |  |  |
|-------------------------|-------------|----------------|-------------|--|--|
|                         |             |                |             |  |  |
| (Ai                     | ddress)     |                |             |  |  |
| (Ac                     | ddress)     |                |             |  |  |
|                         |             |                |             |  |  |
| (C)                     | ity/State/Z | Zip/Phone #)   |             |  |  |
| PICK-UP                 |             | VAIT           | MAIL        |  |  |
| (B                      | usiness E   | ntity Name)    |             |  |  |
|                         | ocument     | Mumber         | <del></del> |  |  |
| (3.                     | ocament     | realliber)     |             |  |  |
| Certified Copies        | _ a         | ertificates of | Status      |  |  |
| _                       |             |                |             |  |  |
| Special Instructions to | Filing Of   | ficer:         |             |  |  |
| }<br>{                  |             |                |             |  |  |
|                         |             |                |             |  |  |
| Name                    |             |                |             |  |  |
| Availability            | `           |                | -           |  |  |
| Document<br>Examiner    | DCC         |                |             |  |  |
| Updater                 | n Sfrice    | Use Only       |             |  |  |
| Updafer<br>Verifyer     | DCC         |                |             |  |  |
| Acknowledgement         | DCC         |                |             |  |  |
| W. P. Verifyer          | DCC         |                |             |  |  |



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SECRETARY OF STATE

### TRANSMITTAL LETTER

| <b>ΓΟ:</b> Registration Section Division of Corporation   | ons                                      |  |   |              |
|---|--|--|---|--------------|
| SUBJECT: Johnson serv   |  |  |   |              |
|   | (Name of corporati                       | ion - must include suffix  | .)  |              |
| Dear Sir or Madam:  |  |  |   |              |
| The enclosed "Application by<br>"Certificate of Existence", and<br>transact business in Florida.      |  |  |   |              |
| Please return all corresponden  | ce concerning this matte                 | er to the following:   |   |              |
| Scott Johnson   |  |  |   | <del> </del> |
|   | (Name                                    | of Person)   |   |              |
| Johnson Services,inc  |  | · · · · · · · · · · · · · · · · · · ·  |   |              |
|   | (Firm/C                                  | 'ompany)   |   |              |
| 2809 n edward ave   |  |  |   |              |
|   | (Ad                                      | dress)   |   |              |
| Panama city Fl 32405  |  |  | <del></del> -   |              |
|   | (City/State                              | e and Zip code)  | ZOON MAY<br>SECRETA<br>ALLAHAS                        |              |
| For further information concer  | ming this matter, please                 | call:  | AY -4<br>ETARY (<br>1ASSEE                            |              |
| Scott Johnson   | at (850                                  | ) 819-4442   | ס הַּב  |              |
| (Name of Person)  | (Area                                    | a Code & Daytime Telep   | phone Number) =                                       |              |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 |  | MAILING ADDRE<br>Registration Section<br>Division of Corpora<br>P.O. Box 6327<br>Tallahassee, FL 323 | tions   |              |
| Enclosed is a check for the fo  | lowing amount:                           |  |   |              |
| □ \$70.00 Filing Fee 💢 \$   | 78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & Certified Copy  | ☐ \$87.50 Filing I<br>Certificate of<br>Certified Cop | Status &     |

## 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.

| ١. | Johnson ser           | vices,Inc   |             | POR F  | ·           |                     |             |
|----|-----------------------|---|-------------|--|-------------|---------------------|-------------|
|    |                       | corporation; must include "INCORPORATEI corp," "Inc," "Co," or "Corp.") | Ο,'         | "COMPANY," "CORPORATION  | ۱,"         |                     |             |
|    |                       | vices,inc of bay county   |             | <u> </u>   |             |                     | <del></del> |
|    | (If name unavail      | able in Florida, enter alternate corporate nam                          | ìe          | adopted for the purpose of transacting   | ig business | s in Flo            | orida)      |
| 2. | Nevada                | 3   | 5.          | 90-0155497   | ,           |                     |             |
|    | (State or country     | under the law of which it is incorporated)                              |             | (FEI number, if app  | licable)    |                     |             |
| 4. | feb 06 2004           |   | <u>.</u>    |  | ,           |                     |             |
|    | (Date                 | of incorporation)   |             | (Duration: Year corp. will cease to  | exist or "  | perpen              | ua!")       |
| 6. |                       |   |             | and the second s |             |                     | ٠           |
|    | (Date first transa    | cted business in Florida. If corporation has n                          |             |  | t "upon qu  | alifica             | tion.")     |
|    |                       | (SEE SECTIONS 607.150   | 01,         | 607.1502 and 817.155, F.S.)  |             |                     |             |
| 7. | 2809 n edwa           | rd ave panama city fl, 32405  |             | _  |             |                     |             |
| •  |                       | (Principal office ac  | ídı         | ress)  |             |                     |             |
|    | same as abov          | ve  |             |  |             |                     |             |
|    |                       | (Current mailing ac   | ldı         | ess)   |             |                     |             |
|    |                       | , , ,   |             | ,  | <u>~</u>    | ×                   |             |
| Đ  | A/C repair a          | n service   |             |  | X23.        | 7004 MA             |             |
| υ. |                       | s) of corporation authorized in home state or                           | co          | untry to be carried out in state of Flo  | orida) 🛫    | =                   |             |
| _  |                       |   |             |  | ಹನ್ನು       | , jt                |             |
| У. | . Name and <u>str</u> | <u>eet address</u> of Florida registered agent                          | : 1         | P.O. Box of Mail Drop Box NO   | L'accepta   | ble)                | n           |
|    | Name:                 | Scott johnson   |             | <u></u>  | FLS         | U                   | O           |
| _  |                       |   |             |  | XX          | ÷.                  |             |
| O  | itice Address:        | 2809 n edward ave   | <u>.~</u> . | The state of the s | $\leq$ m    | $\overline{\omega}$ |             |
|    | ,                     | panama city Fl,   |             | , Florida <b>32405</b>   |             |                     |             |
|    |                       | (City)  | _           | (Zip code)   |             |                     |             |

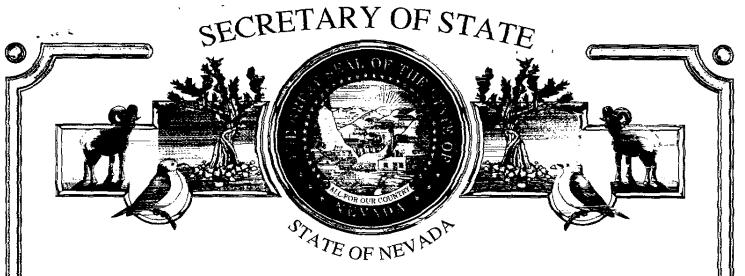
#### 10. Registered agent's acceptance:

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.

(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. DIKI    | CIURS   |                                       |                 |
|------------|---|---------------------------------------|-----------------|
| Chairman   | Scott johnson   |                                       |                 |
| Address:   | 2809 n edward ave panama city F1, 32405                               | <u> </u>                              | <del></del>     |
| Vice Chai  | rman: Scott johnson   |                                       |                 |
| Address:   | 2809 n edward ave panama city Fl , 32405                              |                                       |                 |
| Director:  | Scott johnson   |                                       |                 |
| Address:   | 2809 n edward ave panama city F1 , 32405                              |                                       |                 |
| Director:  | Scott johnson   |                                       |                 |
| Address:   | 2809 n edward ave panama city Fl , 32405                              |                                       |                 |
| B. ÖFF     | ICERS   |                                       |                 |
| President: | Scott johnson   | TAL.                                  | 700%            |
| Address:   | 2809 n edward ave panama city Fl , 32405                              | CRET                                  | E T             |
|            |   | SS SS                                 |                 |
| Vice Pres  | ident: Scott johnson  | E C                                   | T               |
| Address:   | 2809 n edward ave panama city Fi , 32405                              |                                       | #               |
| _          | Seett in Land   |                                       | <del>ш</del>    |
|            | Scott johnson 2809 n edward ave panama city Fl , 32405                |                                       | <del> </del>    |
|            | Scott johnson   |                                       |                 |
|            | 2809 n edward ave panama city FI , 32405                              | · · · · · · · · · · · · · · · · · · · |                 |
|            | If necessary, you may attach an addendum to the application listing a |                                       | l/or directors. |
| _          | (Signature of Director or Officer listed in number 12 of the ap       | pplication)                           |                 |
| 14. Sc     | (Typed or printed name and capacity of person signing                 | ng application)                       |                 |
|            | (1) ped or princed traine and capacity of person signifi-             | ig apprication;                       |                 |



# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, JOHNSON SERVICES, INC., as a corporation of the laws of the State of the State of Nevada and existing under and by virtue of the laws of the State of Nevada since February 6, 2004, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 13, 2004.

DEAN HELLER Secretary of State

Jan Helle

By S. J. Lail

Certification Clerk

