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Florida Department of State
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DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

Cooley Constructors, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
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**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. Cooley Constructors, 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. Oklahoma 3. 73-1302937
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/16/1987 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qual
(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. 2501 N. Western, Oklahoma City, OK 73106
(Principal office address)
P.O. Box 60645 Oklahoma City, OK 73146
(Current mailing address)
8. Renovation and remodeling of federal buildings for the General Services Administration.
(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: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

By: CT Corporation System John J. Linnihan
(Registered agent's signature)
John J. Linnihan, Asst. Vice President

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

A. DIRECTORS

SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

SEE ATTACHMENT

President: Robert K. CooleyAddress: P.O. Box 60646Oklahoma City, OK 73146Vice President: C. L. CooleyAddress: P.O. Box 60646Oklahoma City, OK 73146Secretary: C. L. CooleyAddress: P.O. Box 60646 Oklahoma City, OK 73146Treasurer: Robert K. CooleyAddress: P.O. Box 60646 Oklahoma City, OK 73146

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)

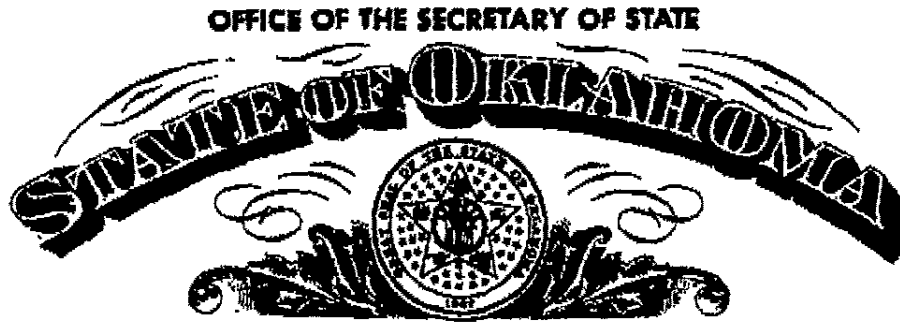
14. Robert K. Cooley, President

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

Attachment to Florida

Officers & Directors

- | | | |
|----|-------------------|------------------------|
| 1. | Full Name: | Robert K. Cooley |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | President & Treasurer |
| | Business Address: | P.O. Box 60646 |
| | City: | Oklahoma City |
| | State: | OK |
| | ZIP Code: | 73146 |
| 2. | Full Name: | C. L. Cooley |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | Vice President & Secy. |
| | Business Address: | P.O. Box 60646 |
| | City: | Oklahoma City |
| | State: | OK |
| | ZIP Code: | 73146 |
| 3. | Full Name: | Lynne Anne Baker |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Business Address: | 13626 Orchard Gate |
| | City: | Poway |
| | State: | CA |
| | ZIP Code: | 92064 |
| 4. | Full Name: | Michelle Howard |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Business Address: | 800 W. Boston St. |
| | City: | Broken Arrow |
| | State: | OK |
| | ZIP Code: | 74112 |



CERTIFICATE OF GOOD STANDING
DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that COOLEY CONSTRUCTORS, INC. whose registered agent is C L COOLEY with its registered office at 2501 N WESTERN AVE OKLA CITY 73146 USA Oklahoma is a Domestic For Profit Business Corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 19th day of July, 2004.

M. Lisa Savage

Secretary Of State