# F04000005121

| ,                                       |
|---|
| (Requestor's Name)                      |
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
| a                                       |
| Office Use Only                         |



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SECALIARY OF SIAL
TALLAHASSEE, FLORING

#### TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations  |
|--|
| SUBJECT: Setzer & Associates, 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:  |
| Larry Setzer   |
| (Name of Person)   |
| Setzer & Associates, Inc.  |
| (Firm/Company)   |
| 2130 Parnell Avenue  |
| (Address)  |
| Fort Wayne, IN 46703   |
| (City/State and Zip code)  |
| For further information concerning this matter, please call:   |
| (Name of Person) at (850) 233 - US29 (Area Code & Daytime Telephone Number 5)  |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  MAILING ADDRESS: Registration Section Division of Corporations Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314             |
| Enclosed is a check for the following amount:  |
| ♥ \$70,00 Filing Fee   |

### 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.

| I. | Gelzer & Associates, inc.  |      |   |          |
|----|--|------|---|----------|
|    | (Enter name of corporation; must include "INCORPORATE" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") | D,   | "COMPANY," "CORPORATION,"   |          |
|    |  |      |   |          |
|    | (If name unavailable in Florida, enter alternate corporate name  | ne : | adopted for the purpose of transacting business in Florida)                       |          |
| 2. | Indiana  | 3.   | 35-2143182  |          |
|    | (State or country under the law of which it is incorporated)   |      | (FEI number, if applicable)   |          |
| 4. | 06/20/2001   | 5.   | Perpetual   |          |
|    | (Date of incorporation)  |      | (Duration: Year corp. will cease to exist or "perpetual")                         |          |
| 6. |  |      |   |          |
|    |  |      | r Florida, if prior to registration)<br>02, F.S., to determine penalty liability) |          |
|    | ·  | .10  | 2,1.5., to determine permity intentity i  |          |
| 7. | 2130 Parnell Avenue, Fort Wayne, IN 46805 (Principal office ac   | ddı  | ess)  |          |
|    | Same   |      |   |          |
|    | (Current mailing ac  | ddı  | ess)  |          |
|    |  |      | TAL   |          |
| 8. | Primarily Retail Sales, including any other lawful purpos  | se   | 1 1 S   |          |
|    | (Purpose(s) of corporation authorized in home state or   | co   | untry to be carried out in state of Florida)                                      |          |
| 9. | Name and street address of Florida registered agent: (P  | 0.0  | Box NOT acceptable)   | )Charges |
|    | Name: Larry Sctzer   |      |   |          |
| O  | Mice Address: Lace Penny La  |      | Loring  | الخنسا   |
|    | Mame: Larry Sctzer  Mice Address: Lose Penny bn  Punana City Beach  (City)                             |      | Florida Larry Setzer $32413$ (Zip code)   |          |
|    |  |      |   |          |

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

Sotzer & Accordates Inc.

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:

| thairman: Larry Setzer       |   |
|------------------------------|---|
| address: 2130 Parnell Avenue |   |
| Fort Wayne, IN 46805         |   |
| ce Chairman:                 |   |
| ddress:                      |   |
|                              |   |
| rector: Larry Setzer         |   |
| ddress: 2130 Parnell Avenue  |   |
| Fort Wayne, IN 46805         |   |
| rector:                      |   |
| Idress:                      |   |
|                              |   |
| OFFICERS                     |   |
| esident: Larry Setzer        |   |
| idress: 2130 Parnell Avenue  |   |
| Fort Wayne, IN 46805         |   |
| ce President:                | O4<br>ALL                                     |
| ldress;                      |   |
|                              | SOFT I  |
| eretary:                     | me R  |
| ldress:                      |   |
| 441000,                      | Şn •  |
|                              |   |
| reasurer:                    |   |
| ddress:                      |   |
| reasurer:                    | listing additional officers and/or directors. |

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

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

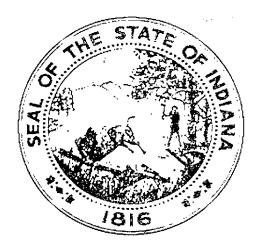
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### SETZER & ASSOCIATES, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 20, 2001, and was in existence or authorized to transact business in the State of Indiana on July 26, 2004.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto setsiny hand and affixed the seal of the State of Indiana, attic city of Indianapolis, this Twenty-Six Day of July 200

TODD ROKITA, Secretary of State

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