

F04000005275
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2004 SEP 13 P 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

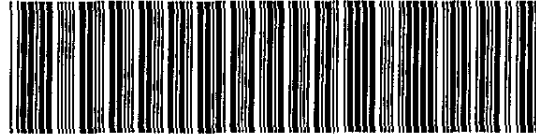
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/04--01023--005 **87.50

TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: WILLIAM FISHER CONSTRUCTION CO. INC.
(Name of corporation - must include suffix)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 FISHER
(Name of Person)
WILLIAM FISHER CONSTRUCTION CO. INC.
(Firm/Company)
1023 WIDEVIEW AVE.
(Address)
TARPON SPRINGS, FL 34689
(City/State and Zip code)

For further information concerning this matter, please call:

WILLIAM FISHER at (727) 943-2409
(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.

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1. WILLIAM FISHER CONSTRUCTION CO. INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. OKLAHOMA

(State or country under the law of which it is incorporated)

3. 73-1571935

(FEI number, if applicable)

4. SEPT. 10 1999

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 825 W. HARTFORD PL. BROKEN ARROW, OK 74012

(Principal office address)

1023 WIDEVIEW AVE. TARPON SPRINGS, FL 34689

(Current mailing address)

8. CONSTRUCTION / RE-CONSTRUCTION

(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 NOT acceptable)

Name:

MICHELLE MAC NEILL

Office Address:

1023 WIDEVIEW AVE.

TARPON SPRINGS

(City)

, Florida 34689

(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.

Michelle MacNeill

(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. DIRECTORS

Chairman: _____

Address: _____

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Vice Chairman: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: WILLIAM J. FISHER

Address: 825 W. HARTFORD PL.

BROKEN ARROW, OK 74012

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  PRESIDENT

(Signature of Director or Officer listed in number 12 of the application)

14. WILLIAM J. FISHER PRESIDENT

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

OFFICE OF THE SECRETARY OF STATE



**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 WILLIAM FISHER CONSTRUCTION CO. INC. whose registered agent is WILLIAM FISHER, with its registered office at 825 W HARTFORD PL BROKEN ARROW 74012 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 31st, day of August, 2004.

M. Susan Savage

Secretary Of State



OKLAHOMA SECRETARY OF STATE

M. Susan Savage
Secretary of State

2300 N. Lincoln Blvd., Room 101
Oklahoma City, OK 73105-4897

Brad Henry
Governor

August 31, 2004

STATEMENT

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WILLIAM FISHER
825 W HARTFORD PLACE
BROKEN ARROW OK 74012

Client ID: 41135600

Process Date: 8/31/04

Receive Date: 8/31/04

| Document Number | Document Detail | Filing Number | Entity Name | Page Count | Fee |
|---------------------|--------------------------------|---------------|--|------------|---------|
| 1812100002 | Certificate of Good Standing | 1900630029 | WILLIAM FISHER CONSTRUCTION CO. INC. | | \$20.00 |
| 1812100003 | Credit Card Surcharge Document | | | | \$0.80 |
| Total Document Fees | | | | | \$20.80 |

| Payment Type | Payment Status | Payment Reference | Amount |
|-------------------------|----------------|-------------------|---------|
| Credit Card | Accepted | 5418xxxxxxxx8749 | \$20.80 |
| Total Payments Received | | | \$20.80 |