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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
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Special Instructions to Filing Officer:	
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SECHEDARY OF STATE
ALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Atkinson Plumbing 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:		
Barry T. Atkinson (Name of Person) Attinson Plumbing	. 4-	
(Name of Person)		
Attension Plumbing (Firm/Company)	, <i>.</i> -	
(Firm/Company)		
Po Box 1607 (Address)	۷	
(Address)		
Desnin, Fr 32540		
(City/State and Zip code)		
Pestin, fr. 32540 (City/State and Zip code) For further information concerning this matter, please call:	r	
Barry Attunson at (850) 376-9981		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section Division of Corporations Division of Corporations		
409 E. Gaines St. P.O. Box 6327		
Tallahassee, FL 32399 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.

1. Atkinson	poration; must include "INCORPORATED	" "COMPANY" "CORPORATION"	- W.	·- ·
"Inc.," "Co.," "Cor	p," "Inc," "Co," or "Corp.")	, committy cold district,		
				7
(If name unavailab	le in Florida, enter alternate corporate nam	e adopted for the purpose of transacting busin	ess in Florida)	
OKlahom) <i>G</i>	73-1232983		
(State or country un	ider the law of which it is incorporated)	FEI number, if applicable)		
Sept 1 199	34	Poroctual		
(Date o	f incorporation)	(Duration: Year corp. will cease to exist o	r "perpetual")	
nlas	and Florida's aurolarizan			
o	Pon Florida's aurierizane (Date first transacted business	in Florida, if prior to registration)	·	-
	(SEE SECTIONS 607.1501 & 607.	1502, F.S., to determine penalty liability)		
7. POBOX 10	(Principal office as	<u></u>	<u> </u>	· • • • •
	(Principal office ac	ldress)		
Sam	د			
	(Current mailing ac	ddress)	ALC SEC	
8. plumbin	5 Contracting	country to be carried out in state of Florida)	<u> </u>	7
* (Purpose(s)	or corporation authorized in nome state or	country to be carried out in state of Floriday		חונוט
Name and street	address of Florida registered agent: (P	O. Box NOT acceptable)	SECHERALY OF STATE ALLAHASSEE, FLORIDA	
Name:	Barry Atkinson		関制	
Office Address:	3806 MISTY WAY	<u>and and an artist of the second and artists of the second artists of the second and artists of the second artists of th</u>		•
	DESTIN	Florida 32541 (Zip code)		-
	(City)	(Zip code)		
10. Registered ag	ent's acceptance:			
				lace

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. DIRECTORS			
Chairman:			
Address:			·
•			
Vice Chairman:	<u> </u>		
Address:			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Barry T A+Kinson			
Address: Po Box 1607	ZALI SE	10	-
Desnu, FL 32540	AHA	OCT	
Vice President: Jack L. Atkinson	SH.	27	
Address: 521 W. 5 th	71.0 11.0 11.0 11.0 11.0 11.0 11.0 11.0	2 K	6
Elk City, ok. 73644	BH.	£	
Secretary: Solly Atkinson		,	
Address: POBOY 1607 DESTIN, FL 32540		,	
Treasurer:			
Address:			
		4	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	1/or directo	ors.	
13. Multte			
(Signature of Director or Officer listed in number 12 of the application) 14. Barry 7. Atkinson - President (Typed or printed name and capacity of person signing application)	/		
(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 <u>ATKINSON PLUMBING, INC</u>, whose registered agent is <u>BARRY T. ATKINSON</u>, with its registered office at <u>2600 PENNINGTON</u> <u>CIRCLE EDMOND 73034 USA</u> Oklahoma is a <u>Domestic For Profit Business Corporation</u> 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 30th, day of September, 2004.

Secretary Of State

M. hisan lavage