

# F040000006797

Florida Department of State  
Division of Corporations  
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Division of Corporations  
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DIVISION OF CORPORATION

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TALLAHASSEE, FLORIDA

## FOREIGN PROFIT QUALIFICATION

Johannes Incorporated

Certificate of Status	0
Certified Copy	1
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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. Johannes Incorporated**

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

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

**2. Delaware**

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

**3. 41-2064168**

(FEI number, if applicable)

**4. 10/09/02**

(Date of incorporation)

**5. Perpetual**

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

**6. upon Qualification**

(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. 2877 Martin Ave., Omaha, Nebraska 68112**

(Principal office address)

**2877 Martin Ave., Omaha, Nebraska 68112**

(Current mailing address)

**8. Real Estate Holding.**

(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: **Business Filings Incorporated**

Office Address: **660 East Jefferson Street**

**Tallahassee**

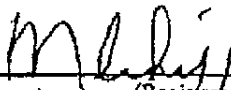
(City)

**, Florida 32301**

(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:**

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Benjamin Johannes BryanAddress: 2877 Martin Ave., Omaha, Nebraska 68112

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**President: Benjamin Johannes BryanAddress: 2877 Martin Ave., Omaha, Nebraska 68112Vice President: Benjamin Johannes BryanAddress: 2877 Martin Ave., Omaha, Nebraska 68112Secretary: Benjamin Johannes BryanAddress: 2877 Martin Ave., Omaha, Nebraska 68112Treasurer: Benjamin Johannes BryanAddress: 2877 Martin Ave., Omaha, Nebraska 68112

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

13. 

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

14. Benjamin Johannes Bryan, President

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

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*Delaware*

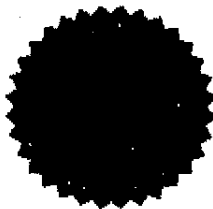
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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JOHANNES INCORPORATED" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF NOVEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3577653 8300

AUTHENTICATION: 3469043

040811854

DATE: 11-10-04