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SECRETARY OF SECULAR ASSEE, F. SECRETARY OF SECULAR ASSEE, F. SEC.

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TRANSMITTAL LETTER

TO:	Registration Sec Division of Cor							
		porations						
SUBJ	ECT:				sociates, LTD			
		(Nar	ne of corpo	ration - mus	t include suffix))		
Dear S	Sir or Madam:							
"Certi	nclosed "Applicati ficate of Existence of business in Flor	e," and check ar						
Please	return all corresp	ondence concer	ning this m	atter to the f	ollowing:			
Ch	ris Horton			No. o.				
			(Nam	e of Person)			
Ha	rrison French & As	sociates, LTD						
			(Firm	/Company)				
80	9 S.W. "A" Street, :	Suite 201						
			(/	Address)			_	
Be	ntonville, AR 7271	2				-	TASE COM	3
		· · · · · · · · · · · · · · · · · · ·	(City/St	ate and Zip	code)			
							EST S	2
For fu	ther information	concerning this	matter, plea	se call:			SEE .	1
							F.C.	T C
Chr	ris Horton		_ at (479_) 273-	7780		93	?: 5
	(Name of Perso	n)	(Aı	rea Code &	Daytime Teleph	ione Numbe	r)	$\ddot{\omega}$
	STREET ADD Registration Sec Division of Corp 409 E. Gaines S Tallahassee, FL	ction corations t.			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		
Enclose	ed is a check for t	he following an	nount:					
327 \$70	.00 Filing Fee	\$78.75 Filia Certificate	-		Filing Fee & led Copy	Certi	O Filing For ficate of S fied Copy	Status &



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 8, 2005

CHRIS HORTON
HARRISON FRENCH & ASSOCIATES, LTD.
809 S.W. "A" STREET, SUITE 201
BENTONVILLE, AR 72712

SUBJECT: HARRISON FRENCH & ASSOCIATES, LTD.

Ref. Number: W05000006608

We have received your document for HARRISON FRENCH & ASSOCIATES, LTD. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 105A00008775

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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.	Hai	rrison French & Associates, LTD , 🔼	sc.			
	(Enter name of c	orporation; must include "INCORPORA orp," "Inc," "Co," or "Corp.")		IPANY," "CORPORATIC	N,"	_
	(If name unavail	able in Florida, enter alternate corporate	name adopted	for the purpose of transacti	ng business in Florida)
2.	Arkansas		3_71-0832	443		
		under the law of which it is incorporated)	(FEI number, if app	plicable)	_
4.	August 30, 19	999	5. Perpetu	al		
	(Date	of incorporation)		ion: Year corp. will cease t	o exist or "perpetual")	
6.	NA.					
		(Date first transacted busin	ness in Florida	, if prior to registration)	E4. A	_
		(SEE SECTIONS 607,1501 & 6		, to determine penalty habit	nty)	
7	809 S. W. "A'	Street, Suite 201, Bentonville, AR 7271				<u> </u>
		(Principal office	e address)			
	809 S. W. "A"	Street, Suite 201, Bentonville, AR 72712				_
		(Current mailing	g address)		Per B	-
					CRET	
8.		nd Engineering Services				_
	(Purpose(s) of corporation authorized in home state	or country to	be carried out in state of Fl	orida)	i
9.	Name and stree	t address of Florida registered agent:	(P.O. Box 1	NOT acceptable)	TA D	
	Name:	C T Corporation System			F.S. 22	
	rvanie.	O : Corporation System			岩石 53	
Of	fice Address:	1200 South Pine Island Road		and the second second	.	
		Plantation	F	lorida <u>33324</u>		
		(City)	, ^	(Zip code)		
10.	Registered ag	ent's acceptance:				
		ed as registered agent and to accept s	service of pro	ocess for the above stated	d corporation at the	place
des	signated in this	application, I hereby accept the appo	ointment as i	registered agent and agre	ee to act in this capa	icity. I
tui an	ther agree to co d I am familiar	omply with the provisions of all statu with and accept the obligations of m	tes relative to v position as	o the proper and complet s registered agent.	te performance of n	y duties,
	•		. –			
		C i Corpo:	ration System			
	By	()m	417	James M. Halpin - Assistant Secretary		
		(Registered	agent's signat	ure)	_	

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:		
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President: Harrison Ogden French	7 S 7	
Address: 809 S.W. "A" Street, Suite 201	LL ARE	
Bentonville, AR, 72712	FEB 2	A Company of the Comp
Vice President: Larry Lott - V. P. Production;	Chris Horton - V. P. Engineering	
Address: 809 S.W. "A" Street, Suite 201	809 S.W. "A" Street, Suite 201	
Bentonville, AR, 72712	Bentonville, AR 72712	
Secretary: Harrison Ogden French	•	
Address: See above		
Treasurer:		_
Address:		
12 (11. 65	the application listing additional officers and/or directors. r listed in number 12 of the application)	
14. Chris Horton; Vice President of Engineering		
	apacity of person signing application)	



Arkansas Secretary of State Charlie Daniels

State Capitol Building ◆ Little Rock, Arkansas 72201-1094 ◆ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

HARRISON FRENCH & ASSOCIATES, LTD.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office August 30, 1999.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 18th day of November 2004.

Charlie Daniels Secretary of State

Online Certificate Authorization Code: 7e925187e6d0920

To verify the Authorization Code, visit www.sosweb.state.ar.us