

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

CORPORATION REINSTATEMENT

MID AMERICA CONSTRUCTION, INC. OF OKLAHOMA

Certificate of Status	0
Certified Copy	0
Page Count	02
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F05000002255			
1. Corporation Name Mid America Construction, Inc. of Oklahoma			
2. Principal Office Address - No P.O. Box # 11624 220th St.		3. Mailing Office Address PO Box 238	
4. Suite, Apt. #, etc.		5. Suite, Apt. #, etc.	
City & State Blanchard, OK		City & State Dibble, OK	
Zip 73010	Country US	Zip 73031	Country US
7. Name and Address of Current Registered Agent		4. Date Incorporated or Qualified To Do Business in Florida 04/12/05	
Name CT Corporation System		5. FEI Number 73-1575409 Applied For ☐ Not Applicable	
Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD		6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status	
Suite, Apt. #, Etc.		☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
City PLANTATION	State FL	Zip Code 33324	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of sections 607.0605 or 617.0603, F.S.			
Signature of Registered Agent <i>Jessica L. Gardner</i>		CT Corporation System Jessica L. Gardner Asst. V.P.	
REGISTERED AGENT MUST SIGN		Date 04/21/09	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officer and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Co-Pres	Michael B. Seabourn	11624 220th St.	Blanchard, OK 73010
Co-Pres	Robert D. Roberts	11624 220th St.	Blanchard, OK 73010
Dir	Rileigh Seabourn	11624 220th St.	Blanchard, OK 73010
REINSTATEMENT 08-09			
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S., the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: <i>Michael B. Seabourn</i>		Michael B. Seabourn	04/20/09
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Office Phone # 405-344-7280