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(Re	equestor's Name)	
, (Ac	ddress)	
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	1. 20%) 1. TTV 10%)	40
(C)	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Coples	Certificates	of Status
Special Instructions to	Filing Officer:	





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TRANSMITTAL LETTER

TO:		stration Section of Con										
SURI		Brooke II	-									
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Dear S	ir or M	ladam:										
"Certif	ficate o	"Applicat f Existences in Flo	e", and ch	reign Coi ieck are s	rporation ubmitted	for a	Authorization to Trans egister the above refere	act Bu enced	isiness in foreign c	i Florida" orporatio	n to	
Please	return	all corresp	ondence	concernir	ng this m	atter	to the following:					
Jennif	er O'Ne	eill				<u></u>	<u> </u>					
	-			· ·	(Nam	e of	Person)					
Brooke	е Согра	oration					e <u>n j</u> e <u>e v</u> elog siste k					
					(Firm	/Cor	mpany)					
10950	Grand	view, Suit	e 600					<i>,,</i>	. *			
			<u> </u>		(/	Addr	ess)					
Overla	nd Parl	k, KS 662	10	= = 53		. 4 4.						
			<u> </u>		(City/St	ate a	nd Zip code)				_	
										ALS:) - -	*3.75
For fur	ther in	formation	concernin	g this ma	itter, plea	ise ca	all:			AHASI	IAY 26	i i i i i i i i i i i i i i i i i i i
Jennife	r O'Nei	111		8	at (800) 642-1872 ext. 175			13.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5	2	-
	(Nan	ne of Perso	on)			rea C	ode & Daytime Telep	hone 1	Number)	FLORIDA	3:16	F.1.40
Registr Divisio 409 E.	ration S on of Co Gaines	orporation	ıs		-	-	MAILING ADDRES Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions				
Enclose	ed is a	check for	the follow	ing amou	ınt:							
S \$70.	.00 Fili	ing Fee		75 Filing tificate of		0	\$78.75 Filing Fee & Certified Copy	ø	Certific	Filing Fee cate of Stated 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.

1. Brooke Inve	stments, Inc.		- 100 mg -
	f corporation; must include "INCORPORATION," "Inc," "Co," or "Corp.")	ED	," "COMPANY," "CORPORATION,"
(If name unava	ailable in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)
2. Kansas		3.	48-1044369
(State or countr	y under the law of which it is incorporated)	_	(FEI number, if applicable)
4. 11/17/1987		5.	Perpetual
(Da	ate of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualific	cation	. <u>.</u>	
(Date first trans			ot transacted business in Florida, insert "upon qualification.") 1, 607.1502 and 817.155, F.S.)
7. 10950 Grand	view, Sutie 600, Overland Park, KS 6621	0	<u> </u>
	(Principal office	ado	iress)
10950 Grand	view, Sutie 600, Overland Park, KS 6621	0	in the second
	(Current mailing	ado	iress)
··	ase and sublease of real and other prope	_	
(Purpose	e(s) of corporation authorized in home state of	or c	ountry to be carried out in state of Florida)
9. Name and st	reet address of Florida registered ager	ıt:	ountry to be carried out in state of Florida)
Name:	NRAI Services, Inc.		ASSET
Office Address:	2731 Executive Park Drive, Suite 4		The Property of the Property o
	Weston		. Florida 33331 코드 -
	(City)		(Zip code)
Having been na designated in th further agree to	is application, I hereby accept the appoin	inti es i	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutie osition as registered agent.
	NRAI Services, Inc.	>	7
	By:	\leq	
	(Registered agent's signatu	ure)	KAREN REDMAN, ASST-SEZ.

- 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: Rob Orr Address: 210 West State Street, Phillipsburg, KS 67661 Vice Chairman: Leland Orr Address: 210 West State Street, Phillipsburg, KS 67661 Director: Address: Director: Address: B. OFFICERS President: Leland Orr Address: 210 West State Street, Phillipsburg, KS 67661 Vice President: Anita Larson Address: 10950 Grandview, Suite 600, Overland Park, KS 66210 Secretary: Anita Larson Address: 10950 Grandview, Suite 600, Overland Park, KS 66210 Treasurer: Leland Orr Address: 210 West State Street, Phillipsburg, KS 67661 Brooks Corporation Sole Juner 10950 Grandview, Suite 6000, Quelland Park, KS 66010 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

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

14. Leland Orr, President

Brooke Investments, Inc. Officers and Directors

Name:	Title:	Business Address:	Phone:	% Owned:
Leland Orr	President	210 West State Street Phillipsburg, KS 67661	800-642-1872	0%
Anita Larson	Vice-President	10950 Grandview, Sutie 600 Overland Park, KS 66210	800-642-1872	0%
Anita Larson	Secretary	10950 Grandview, Sutie 600 Overland Park, KS 66210	800-642-1872	0%
Leland Orr	Treasurer	210 West State Street Phillipsburg, KS 67661	800-642-1872	0%
Rob Orr	Director	210 West State Street Phillipsburg, KS 67661	800-642-1872	0%
Leland Orr	Director	210 West State Street Phillipsburg, KS 67661	888-292-4056	0%
Brooke Corporation	Sole Owner	10950 Grandview Sutie 600 Overland Park, KS 66210	800-642-1872	100%

D5 MAY 26 PM 3: 16

STATE OF KANSAS

OFFICE OF SECRETARY OF STATE RON THORNBURGH



To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the State of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to corporations and that I am the proper official to execute this certificate.

I FURTHER CERTIFY THAT

BROOKE INVESTMENTS, INC.

is a regularly and properly organized corporation under the laws of the State of KANSAS, having been incorporated in Kansas on the 17th day of November, A.D. 1987 Do S and has paid all fees due this office and is in good standing according to the records now on file in the office of Secretary of State.



In testimony whereof:

I hereto set my hand and cause to be affixed my official seals.

Done at the City of Topeka, this 3rd day of May, A.D. 2005

RON THORNBURGH SECRETARY OF STATE