F05000003785

SECRETARY OF STATE (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status _ 1005 15709 Special Instructions to Filing Officer:

Office Use Only



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FILED

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

2005 JUN 29 A !1: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 28, 2005

RONALD HALE 10209 LANCE LANE SAND SPRINGS, OK 74063

SUBJECT: ECT SERVICES, INC. Ref. Number: W05000015729

We have received your document for ECT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 005A00020924



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 JUN 29 A 11: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 23, 2005

RONALD HALE 10209 LANCE LANE SAND SPRINGS, OK 74063

SUBJECT: ECT SERVICES, INC. Ref. Number: W05000015729

We have received your document for ECT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 705A00036982

TRANSMITTAL LETTER

FILED

TO:	Registration Section Division of Corporations						Z005 JUN	29 /	A II: 29	
		•	•	1			SECRET. TALLAHA	ARY OF	STATE	
SUBJ	ECT:	EL	SERVICES,	of corner	ation - must	include suffix)			LEOKIDA	
			(Maiii)	or corpor	ation - musi	. metade suttix,	,			
Dear S	ir or Ma	dam:								
"Certif	ficate of		on by Foreign Co ;" and check are ida.							
Please	return a	ll correspo	ondence concerni	ng this ma	tter to the fo	ollowing:				
		RON	ALD HALE		, -				•	
		<u> </u>	ALD HALE	(Name	of Person)				_	
		EC	T SERVICE	= INC.						
		100	409 LANC	E LANG		ا (المعنوا				
-		Sn,	NO Spring	(A S OK	ddress) 740£3					
		<u>-</u>		(City/Sta	te and Zip	ode)			 ·	
For fur	ther info	rmation o	concerning this m	atter, pleas	se call:		÷			
CH	ROL .	SLANKI	4 E/S	at (91	8) 24	45-5077 Daytime Teleph		~.	·	
	(Name	of Person	n)	(Are	ea Code & I	Daytime Teleph	none Number)			
	Registr Divisio 409 E.	ET ADDI ation Secon on of Corp Gaines St assee, FL	tion oorations 			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	. –		
Enclos	ed is a cl	neck for tl	he following amo	unt:						
≸ \$70	.00 Filin	g Fee	☐ \$78.75 Filing Certificate of			Filing Fee & ed Copy	☐ \$87.50 Fill Certificate Certified	e of Stat		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA FILED

, ECTS	REIGN CORPORATION TO TR			SECRETARY	A II: 29
(Enter name of	corporation; must include "INCORP Corp," "Inc," "Co," or "Corp.")	ORATED," "CO	MPANY," "CORPORATI	SECRETARY OF ON, FALLAHASSEE,	-STATE FLORIDA
E.C.T.	Sve's., INC.		5**	·	1,0 0, 200 - 200 c
(If name unavai	lable in Florida, enter alternate corpo	orate name adopte	f for the purpose of transac	ting business in Florida)
2. OKLAHO	mA	3.	36-4535300		ر <u>در المحدد المراب</u>
(State or country	under the law of which it is incorpo		(FEI number, if a	pplicable)	<u></u>
4 5-2	1-03	5	PERPETUAL		
(Dat	e of incorporation)		tion: Year corp. will cease	to exist or "perpetual")	→**:*''* !
6	4-15-05		7 7	**	
o			a, if prior to registration) , to determine penalty liab		And the second s
7 10209	A LANCE LANE	Sauce Sina	MAS DK 7406	3	
/ ·	(Principal	office address)			ima (1924) ili Parre (No. 10 - No.
SAMIE			No. 1997 April 1997 April 1997 April 1997	The second secon	* # # <u>.</u>
		nailing address)	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	Abertub - Control Led	
TRAININ	16 SEMINARS		ne de la companya de La companya de la co	- 5 4	er rever
	s) of corporation authorized in home	state or country to	be carried out in state of I	lorida)	<u> — 14.3 Gradina i io</u>
9. Name and stree	et address of Florida registered ag	gent: (P.O. Box	NOT acceptable)		-
Name:	WOODY THRNBOW	lo William	SERVICE	, .	
Office Address:	162 COMMERCIAL	DRIVE		- A JA-2	
	CANTONMENT		Florida 32433		
	(City)	·	(Zip code)		10.55 v 2 1
Having been nam lesignated in this further agree to c and I am familiar	gent's acceptance: ed as registered agent and to acc application, I hereby accept the omply with the provisions of all s with and accept the obligations	appointment as statutes relative of my position o	registered agent and ag to the proper and compl is repistered agent.	ree to act in this capa ete performance of m	icity. I ny duties,
	Partial Upper Control of Section 1	2	and and the state of the state		

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.

(Registered agent's signature)

12 Names and business addresses of officers and/or directors:

A. DIRECTORS	: n	FILED	
Chairman:	+		
Address:	1A	7005 JUN 29 A II: 29	
	·	SECRETARY OF STATE TALL AHASSEE, FLORIDA	· · • • • • • • • • • • • • • • • • • •
Vice Chairman:			
Address:	<i>I</i> +		
			·
Director:			<u>:</u>
Address:	<u>H</u>		
		<u>-</u> .	
Director:			
Address:	1		
, ,			
B. OFFICERS			
President: Konald U	U. HAIE		
, ,			· · · - · -
SAND SOCINO	s OK 7401	63	·
VII ~ '			<u></u> .:₩ `` '-
Address:		•	
Secretary: JENNIFE	N. HAIE		; · വ
Address: 10209 LA	NCE LANE	SAND Springs OK 74063	
Treasurer: NANCIL	HAIE		
Address: 10209 LAN	ce LANC	SAND Springs OK 74063	·
·		•	
NOTE: If necessary, you may attach	an addendum to the app	plication listing additional officers and/or directors.	
13. Konathl 1	w. JESK	in number 12 of the application)	te a man
14. Konald W.	HA18	m number 12 of the approaction)	
	nted name and capacity	of person signing application)	

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FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE JUN 29 A 11: 30

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

TBI(U.S.), LLC
2. The name and the Florida street address of the registered agent and office are:
R. Keith Robinson
(Name)
322 Red Cleveland Blvd. Florida Street Address (P.O. Box NOT ACCEPTABLE)
Sanford, FL 32773
City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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>ECT SERVICES</u>, INC. whose registered agent is <u>RONALD W HALE</u>, with its registered office at <u>10209 LANCE LN SAND SPRINGS</u> <u>74063 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 <u>18th</u>, day of <u>April</u>, <u>2005</u>.

Secretary Of State

M. hisan Javege