

F06000005912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

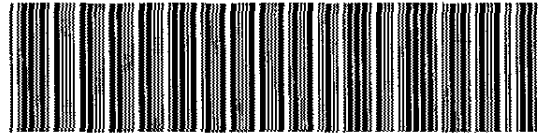
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500079669275

09/13/06--01038--001 **78.75

FILED
06 SEP 13 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2.8.9-14

**PHILIP L. HAMILTON
ATTORNEY AT LAW
2430 Shadowlawn Drive, Suite 12
Naples, Florida 34112
Ph. 239-775-7474
Fax 239-775-1615**

September 11, 2006

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, Fl. 32314-6317

Re: Application by Betsted Enterprises, a Foreign Corporation, to Do Business in Florida.

Dear Ladies and Gentlemen:

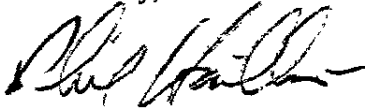
Regarding the above corporate name, please find enclosed the following items:

- a. Application;
- b. State of Indiana Certificate of Existence; and
- c. Check for \$78.75 for certified copy.

Please approve and send back the certified copy.

Thank you.

Sincerely,



Philip L. Hamilton

cc: file

**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. BetsTed Enterprises, Inc.

(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. Indiana

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

3. _____

(FEI number, if applicable)

4. May 3, 2006

(Date of incorporation)

5. "perpetual"

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

6. no transactions in Florida to date

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2037 Wexford Green Dr., Velrico, FL. 33594

(Principal office address)

2037 Wexford Green Dr., Velrico, FL. 33594

(Current mailing address)

8. _____

(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 NOT acceptable)

Name: Theodore E. Textor

Office Address: 2037 Wexford Green Dr.,

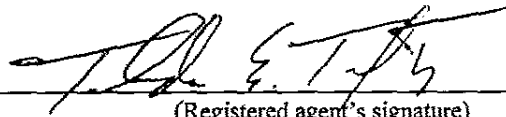
Velrico, Florida 33594

(City)

(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.

FILED
06 SEP 13 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Theodore E. Textor

Address: 2037 Wexford Green Dr., Velrico, FL. 33594

FILED
06 SEP 13 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Elizabeth M. Textor

Address: 2037 Wexford Green Dr., Velrico, FL. 33594

Director: Richard Williamson

Address: 4423 Silver Fox Dr., Naples, FL. 34119

B. OFFICERS

President: Theodore E. Textor

Address: 2037 Wexford Green Dr., Velrico, FL. 33594

Vice President: _____

Address: _____

Secretary: Elizabeth M. Textor

Address: 2037 Wexford Green Dr., Velrico, FL. 33594

Treasurer: Elizabeth M. Textor

Address: 2037 Wexford Green Dr., Velrico, FL. 33594

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)

Theodore E. Textor

14. _____

President/Director

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

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greetings:

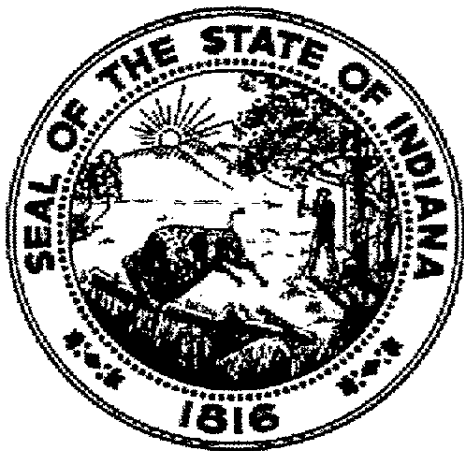
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

BETSTED ENTERPRISES, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 03, 2006, and was in existence or authorized to transact business in the State of Indiana on August 24, 2006.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Fourth Day of August, 2006.

A handwritten signature in black ink, reading "Todd Rokita".

TODD ROKITA, Secretary of State

2006050800779 / 2006082483705