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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: TYONEK SE	RVICES GROUP		
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
Dear Sit of Madain.			
The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida.	or Authorization to Transact Business in Florida," to register the above referenced foreign corporation to		
Please return all correspondence concerning this mat	ter to the following:		
Sally Clampitt	, and the second		
	of Person)		
Tyonek Services Group, Inc.			
	Company)		
1689 C Street, #219			
(A	ddress)		
Anchorage, AK 99501-5131			
(City/State and Zip code)			
For further information concerning this matter, pleas	e call:		
Sally Clampitt at (90°	7 , 272-0707		
Sally Clampitt (Name of Person) at (907) 272-0707 (Area Code & Daytime Telephone Number)			
(Time of Follows)	a code & Baytime retephene reamosty		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
New Filing Section	New Filing Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 32301	Turiditussee, TE 32314		
Enclosed is a check for the following amount:	•		
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy Certified 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.

(Enter name of co	yonek Services Group, I orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")		,",
(If name unavaila	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting	g business in Florida)
. A	Alaska 3	20-1603684	
·	under the law of which it is incorporated)	(FEI number, if appli	icable)
August 3	0, 2004	Perpetual	
` 	of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
-		in Florida, if prior to registration)	- 2
1600 C C	•	1502, F.S., to determine penalty liability	у)
1009 C 3	treet, #219, Anchorage, (Principal office ad		
1690 C S	treet, #219, Anchorage,		
1009 C 3	(Current mailing ac		
	(0	·,	
3. Holding o	company / management		- <u>-</u> -
(Purpose(s	s) of corporation authorized in home state or	country to be carried out in state of Flor	rida)
9. Name and stree	et address of Florida registered agent: (P	O. Box NOT acceptable)	<u> </u>
Name:	CT Corporation System	า	AH.
	1200 South Pine Island		FIL 06 NOV 22 CLLAHASSE
Office Address:	**************************************		The second
	Plantation	, Florida 33324	LED 2 PM 4:00 RY OF STATE SEE, FLORIDA
•	(City)	(Zip code)	90 O
10. Registered as	gent's acceptance:		, an

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.



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.

FLORIDA

CONSENT TO SERVE AS REGISTERED AGENT

CT Corporation System having been designated to act as Registered Agent Hereby agrees to act in this capacity for the following Corporation: Tyonek Services Group Inc.

CT CORPORATION SYSTEM

Kathleen C. Gariepy, Asst. Sec.

Date: 11/13/2006

CT Corporation System 1200 South Pine Island Road Plantation, FL 33324

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Bart K. Garber
Address: P.O. Box 1091
Loxahatchee, FL 33470-1091
Vice Chairman:
Address:
Director: Scott Pfeifer
Address: 1689 C Street, #219
Anchorage, AK 99501-5131
Director: Lenn A. Doran
Address: 1689 C Street, #219
Anchorage, AK 99501-5131
B. OFFICERS
President: Bart K. Garber
Address: P.O. Box 1091
Loxahatchee, FL 33470-1091
Vice President: Scott Pfeifer
Address: 1689 C Street, #210
Anchorage, AK 99501-5131
Secretary: Lenn A. Doran
Address: 1689 C Street, #219, Anchorage, AK 99501-5131
Treasurer: Lenn A. Doran
Address: 1689 C Street, #219, Anchorage, AK 99501-5131
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)
Lenn A. Doran. Secretary-Treasurer

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

Alaska Entity # 88400D

State of Alaska Department of Commerce, Community, and Economic Development

CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

TYONEK SERVICES GROUP, INC.

on the 30th day of August, 2004 filed in this office its Articles of Incorporation, as a Business Corporation organized under the laws of this state.

I FURTHER CERTIFY that said Business Corporation is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 17th day of November, 2006.

Julian Gree

William C. Noll Commissioner

Certification Number: 155944-3

Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp