

FO7000004601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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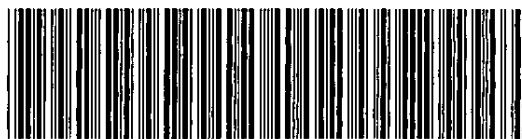
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/07--01008--003 **78.75

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2007 SEP 13 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-14

NEWLAND & ASSOCIATES, PLLC

Attorneys at Law • Certified Public Accountants

September 10, 2007

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Tile Ologist, Inc.

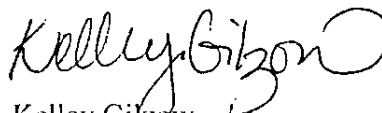
Dear Sir or Madam:

Please find enclosed the Cover Letter, Application by Foreign Corporation for Authorization to Transact Business in Florida and the Certificate of Good Standing for the above-referenced corporation. Please also find enclosed a check in the amount of \$78.75 to cover the filing fee and the certified copy. Please return the certified copy in the self-addressed postage paid envelope that has been provided for you.

Thank you for your attention in this matter and please feel free to call with any questions that you may have.

Sincerely,

NEWLAND & ASSOCIATES, PLLC



Kelley Gilzow
Paralegal

Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tile Ologist, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Andrew B. Faulkner
(Name of Person)

Newland & Associates, PLLC
(Firm/Company)

10 Corporate Hill Dr., Ste. 330
(Address)

Little Rock, AR. 72205
(City/State and Zip code)

For further information concerning this matter, please call:

Andrew B. Faulkner at (501) 221-9393
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & 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.*

1. Tile Ologist, 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. Arkansas 3. 30-0143553
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/12/2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. HL 82, Box 80, Violet Hills, AL. 72584
(Principal office address)

HL 82, Box 80, Violet Hills, AL. 72584
(Current mailing address)

8. tile contractor
(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: Doyle McBurnett

Office Address: 357 W. Marion Ave.

Punta Gorda, Florida 33950
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Doyle McBurnett

(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Doyle McBurnett

Address: 357 W. Marion Ave.
Punta Gorda, FL 33950

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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)

14. _____

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

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2007 SEP 13 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



**Arkansas Secretary of State
Charlie Daniels**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

TILE OLOGIST, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office February 12, 2003.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 6th day of September 2007.



Charlie Daniels
Secretary of State

Online Certificate Authorization Code: fea0017db59015b

To verify the Authorization Code, visit sos.arkansas.gov