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| (Re | equestor's Name) | | | |
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| (Ac | idress) | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nai | me) | | |
| (Do | ocument Number) |) | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECREBARY OF STATE

COVER LETTER

| SUBJECT: Melody T Farms, Inc. | |
|---|---|
| (Name of corpora | ation - must include suffix) |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida. | For Authorization to Transact Business in Florida," to register the above referenced foreign corporation to |
| Please return all correspondence concerning this mat | eter to the following: |
| Mary A. Baisden | |
| | of Person) |
| Melody T Farms, Inc. | , |
| (Firm/ | Company) |
| P. O. Box 3073 | |
| (Ad | ddress) |
| Huntington, WV 25702 | |
| (City/Sta | te and Zip code) |
| For further information concerning this matter, pleas | e call: |
| Mary A. Baisden at (304 |) 522–2560 |
| (Name of Person) (Are | ea 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: | |

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. Melody | T Farms, Inc. | | | | | | |
|---|---|--------------|----------------|------------------------------|----------------|--------------|---|
| (Enter name of corporation "Inc.," "Co.," "Corp," "Ir | on; must include "INCORPORATION," "Co," or "Corp.") | ED," "C | OMPANY, | " "CORPORATION," | | | |
| | | | | | | | |
| Melody | T Farms of West Virgin | nia. I | nc. | | | | |
| (If name unavailable in F | lorida, enter alternate corporate na | me adop | ted for the | purpose of transacting busi | ness in Flo | orida) | |
| 2. West V | irginia | 3 | 5505738 | 64 | | | |
| (State or country under th | irginia e law of which it is incorporated) | | | (FEI number, if applicable | :) | | |
| 4. March 8 | 3, 1977 | 5. | Perpetua | al | | | |
| (Date of incom | 3, 1977 poration) | (Du | ration: Ye | ar corp. will cease to exist | or "perpet | ual") | |
| 6. | | | | | | | |
| | (Date first transacted busine | | | | | | |
| | (SEE SECTIONS 607.1501 & 60 | 7.1502, F | F.S., to dete | rmine penalty liability) | | | |
| 74023 OH | nio River Rd., Huntingt | | V 2570 | 2 | | | |
| | (Principal office | address) | | | | | |
| P. O. I | Box 3073, Huntington, W | W 25 | 702 | | | | |
| | (Current mailing | address) | • | | | | |
| | | | | | | 0 | |
| 8. Any law | oration authorized in home state o | 4 | . 4 | ind out in state of Florida) | <u> </u> | <u>CD</u> | |
| (Purpose(s) of cor | poration authorized in nome state of | r country | to be carr. | ied out in state of Florida) | 全部 | | ₹ |
| 9. Name and street addre | ss of Florida registered agent: (| P.O. Bo | x <u>NOT</u> a | cceptable) | AHASSEE FLORII | 08 JAN 24 PM | 三三 |
| Name: Mar | k R. Antonelli | | | | | | <u> </u> E69 |
| Name. <u>Far</u> | K K, Antonelli | | - | | E C | | ======================================= |
| Office Address: 420 | South Dixie Highway, | <u>Third</u> | Floor | | | | |
| Cor | al Gables | | , Florida | 33146 | ♪ | | |
| | (City) | | | (Zip code) | | | |
| 10. Registered agent's a | econtance. | | | | | | |
| | egistered agent and to accept se | ervice of | r process f | for the above stated corp | oration a | t the p | lace |

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.

| 12. Names an | d business addresses of off | icers and/or directors | s: | | :I a .: | 00 | |
|-----------------|-----------------------------|---------------------------------------|---|--------------|----------------|---------------------------------------|--|
| A. DIRECTO | ORS | | | | SECH | | |
| Chairman: | Timothy Nichols | | | | AS: | <u>1/2</u> | |
| Address: | 10 Carriage Lane | | | | m _c | | |
| ····· | Barboursville, WV | 25504 | | | <u> </u> | ::- ట | |
| Vice Chairman: | | | | | Smi | | |
| Address: | | | | <u></u> | | · · · · · · · · · · · · · · · · · · · | |
| Director: | Melody Nichols | | | | | | |
| Address: | 6 Nichols Drive | | | | | | |
| | Barboursville, WV | 25504 | | | | | |
| Director: | Pamela Nichols | | | | • | | |
| Address: | 10 Carriage Lane | | | | | | |
| | Barboursville, WV | 25504 | | <u>.</u> | | | |
| B. OFFICER | S | | | | | | |
| President: | Timothy Nichols | | | | | | |
| Address: | 10 Carriage Lane | | | | | | |
| | Barboursville, WV | 25504 | | | | | |
| Vice President: | Melody Nichols | | Pamela Nichols | | | | |
| Address: | 6 Nichols Drive | | 10 Carriage Lane | | | | |
| | Barboursville, WV | 25504 | Barboursville, WV | 25504 | | | |
| Secretary: | Melissa Lane | · · · · · · · · · · · · · · · · · · · | | | | | |
| Address: | 9 Carriage Lane, B | arboursville, | WV 25504 | | | | |
| Treasurer: | Mary Baisden | | | · · · | ·· | | |
| Address: | 125 North Terrace, | Huntington, W | v 25705 | | | | |
| NOTE: Note: | assary, you may attach an a | y De | olication listing additional continuous in number 12 of the application | | directors. | | |
| 14. | Mary A. Baisden, | | r.F. | , | | | |
| ** | | | of person signing applicati | on) | | | |



I, Betty Ireland, Secretary of State of the State of West Virginia, hereby certify that

MELODY T FARMS, INC.

was incorporated under the laws of West Virginia and a Certificate of Incorporation was issued by the West Virginia Secretary of State's Office on March 8, 1977.

I further certify that the corporation has not been revoked by the State of West Virginia nor has the West Virginia Secretary of State issued a Certificate of Dissolution to the corporation.

Accordingly, I hereby issue this

CERTIFICATE OF EXISTENCE

SECHEWAY OF SHITE TALLAHASSEE, FLORIDA 08 JAN 24 PM 1: 31

APPROVE AND EL



Given under my hand and the Great Seal of the State of West Virginia on this day of January 16, 2008

Detty Treland
Secretary of State