

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GRH - Eagle One 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:

Kathy Carty
(Name of Person)
Eagle One Inc
(Firm/Company)
4001 Planters Road
(Address)
Fort Smith Ar 72908
(City/State and Zip code)

For further information concerning this matter, please call:

Kathy Carty at (479) 785-3524
(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. Eagle One, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ino.," "Co.," or "Corp.")

GRH Eagle One, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Arkansas 3. 71-0765465
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/20/94 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. 4001 Planters Road, Fort Smith, Ar 72908
(Principal office address)

4001 Planters Road, Fort Smith, Ar 72908
(Current mailing address)

8. delivery company
(Purpose(s) of corporation authorized in home state of country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Incorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(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.

Janice Spull on behalf of Incorp Services, Inc.
(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.

APPROVED AND FILED
08 DEC 22 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Greg Hasley
Address: Yool Planters Road
Fort Smith, Ar 72908

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Greg Hasley
Address: Yool Planters Road, Fort Smith, Ar 72908

Vice President: _____
Address: _____

Secretary: Wittney Hasley
Address: Yool Planters Road, Fort Smith Ar 72908

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. Greg Hasley, President
(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED
08 DEC 22 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



**Arkansas Secretary of State
Charlie Daniels**

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

APPROVED
AND
FILED
08 DEC 22 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

EAGLE ONE, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office December 20, 1994.

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 29th day of September 2008.

Charlie Daniels

Charlie Daniels
Secretary of State

Online Certificate Authorization Code: e32dcfcb8f549c4

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