# F09000004191

(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:				
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SECRETARY OF STATE

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: NRP Advisors, 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," or "Certificate of Good Standing" 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:
Dan North
Name of Person
NRP Advisors, Inc.
Firm/Company
677 N. Main Street   →   →
Address E S
Address  Bryan, Ohio 43506  City/State and Zip code  City/State and Zip code
City/State and Zip code
m
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dan North at (419) 636-4677
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 P.O. Box 6327 Control of Corporations Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Cop 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.

	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	·	
(If name unavail	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting b	usiness in Florida)	
DELAWARE		3		
(State or country	under the law of which it is incorporated)			
08/29/2006		5. PERPETUAL		
	of incorporation)	(Duration: Year corp. will cease to exi	st or "perpetual")	
. UPON APPRO				
		ess in Florida, if prior to registration) 17.1502, F.S., to determine penalty liability)		
209 N MAIN ST	REET BRYAN, OHIO 43506			
•	(Principal office	address)	- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1	
	` .	ŕ		
	(Current mailing	address)	<del></del>	
			2009 OCT 23 PM 12: SECRUTARY OF STATALLAHASSEE, FLORI	
•	T INVESTMENT ADVISOR BROKER/		<u> </u>	
(Purpose(s	o) of corporation authorized in home state of	or country to be carried out in state of Florida	TAR ASS	
. Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	e End End End End End End End End End End	
Name:	NRAI Services, Inc.		77 S PR	
Office Address:	2731 Executive Park Dr., Ste 4		IATE ORIDA	
	Weston	, Florida 33331		
	(City)	(Zip code)		
Having been nam lesignated in this further agree to c	application, I hereby accept the appo	ervice of process for the above stated co intment as registered agent and agree to es relative to the proper and complete p	act in this capacity	

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. Nam	les and business addresses of officers and/or directors:			
A. DIRI	ECTORS			
Chairman	Earl Clifford Oberlin, III			
Address:	677 N Main St			
	Bryan, Ohio 43506			
Vice Chai	irman:			
Address:		<del></del>		
	Robert Francis			
Address:	33272 Valle Road Suite 100			
	San Juan Capistrano, CA 92675			
Director:	Brian Carlson			
Address:	33272 Valle Road Suite 100			
	San Juan Capistrano, CA 92675			
B. OFF	ICERS	Z	2009	
President	Earl Clifford Oberlin, III	ACC ACC	9 00	*****
Address:	677 N Main Street	TAR: ASS	123	CO MANAGEMENT
	Bryan, Ohio 43506	m <sub>C</sub>	P	m
Vice Pres	ident:	98	22:	
Address:				
	:			
Address:				
Treasurer	:			
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	and/or dire	ectors.	
	18 110011			
	(Signature of Director or Officer listed in number 12 of the application)	<del></del>		

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

## Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NRP ADVISORS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2009.

4212227 8300

090857993

Jeffrey W. Bullock, Secretary of State AUTHENTYCATION: 7537752

DATE: 09-21-09

You may verify this certificate online at corp.delaware.gov/authver.shtml