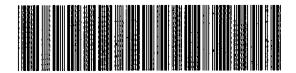
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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duringer Fathy Manna)
(Business Entity Name)
·
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Rad Boy, 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:  Name of Person
Ranke of Person  Firm/Company
102 Industrial DY
Batesville AR 72501
City/State and Zip code  ryland. Kilffer (a) bod by your lowers. Coly  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ryland Kieffer at (570) 698 · 0090 / 870-6/3-564  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  Enclosed is a check for the following amount:  MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Finclosed is a check for the following amount:
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\sim \text{ \text{ \text{ \text{Certificate of Status}}}} \square \text{ \text{ \text{ \text{Certified Copy}}}} \square \text{ \text{ \text{S}} \$87.50 Filing Fee, } \text{ \text{Certified Copy}} \text{ \text{Certified Copy}} \text{ \text{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 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) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (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: Office Address: 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. NRAI Services, Inc. Matt Thompson, Assistant Secretary 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:			
			<del>-</del> .
Vice Chairman:			
Address:			<del></del>
Director:			
Address:	<del>-</del>		
	<del></del>		
Director:			
Address:			
			<del></del>
B. OFFICERS	<u> </u>	20	
President: Phillip Pulluy		2010 FE	
Address: 102 Iridustrial Dr	TASE	<del></del>	- COUNTRY - E
Batwrille HK 1901	SEE F	9 -	garages:
Vice President: Kolser + Hoster	- <del>SS</del>	_ <u>∵:</u> _ ⊒r	P. P.
Address: 102 Industrial Dr	Ç.	50	
Batesville AR 72501	<del></del>		
Secretary:			
Address:			
Treasurer:		<del></del>	
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or dir	ectors	
12 Millio Lunus	01 011		
(Signature of Director or Officer listed in number 12 of the application)			
14. Phillip Pulley President (Typed or printed name and capacity of person signing application)	_ <del>.</del>		
(1) ped or printed name and capacity of person signing application)			



#### 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

#### BAD BOY, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office October 1, 1998.

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 12th day of February 2010.

Charlie Duniels Secretary of State

Online Certificate Authorization Code: 6fca1a741241e8d

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