

MAR. 25. 2010 9:00 AM

CAPITAL CONNECTION

NO. 7689

P. 1

Page 1 of 1

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

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FOREIGN PROFIT/NONPROFIT CORPORATION
DEL CORPORATION

Certificate of Status	0
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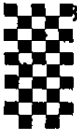
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MAR. 25. 2010 9:05AM

CAPITAL CONNECTION 7:30 AM PAGE 1/001 NO. 7689rvp. 2



March 23, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

YOUR CAPITAL CONNECTION, INC.

SUBJECT: DEL CORORATION
REF: W10000014389

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain both the street address of the principal office and the mailing address of the entity.

A brief description of the entity's nature of business must be included in the document.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

FAX Aud. #: H10000064461
Letter Number: 910A00007076

**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. DEL CORPORATION

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

DEL TANK CORPORATION

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. LOUISIANA

(State or country under the law of which it is incorporated)

3. 72-1284070

(FEI number, if applicable)

4. 12/8/1994

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. 11-28-10

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

7. 436 Hwy. 93, Scott, LA 70583

(Principal office address)

P O BOX 61460, LAFAYETTE, LA 70598

(Current mailing address)

8. Any and all lawful business.

(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:

YOUR CAPITAL CONNECTION, INC.

Office Address:

417 E. VIRGINIA ST, STE 1

TALLAHASSEE

(City)

Florida 32312
(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.

(Registered agent's signature)

SETH NEELEY FOR YOUR CAPITAL CONNECTION, INC.

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.

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

A. DIRECTORSChairman: DELBERT M KULBETHAddress: P O BOX 61460, LAFAYETTE, LA 70596

Vice Chairman: _____

Address: _____

Director: ROBERT M KULBETHAddress: P O BOX 61460, LAFAYETTE, LA 70596Director: SCOTT CREELAddress: P O BOX 61460, LAFAYETTE, LA 70596**B. OFFICERS**President: ROBERT M KULBETHAddress: P O BOX 61460, LAFAYETTE, LA 70596Vice President: SCOTT CREELAddress: P O BOX 61460, LAFAYETTE, LA 70596P O BOX 61460, LAFAYETTE, LA 70596Secretary: P DALE LADNERAddress: P O BOX 61460, LAFAYETTE, LA 70596Treasurer: P DALE LADNERAddress: P O BOX 61460, LAFAYETTE, LA 70596

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

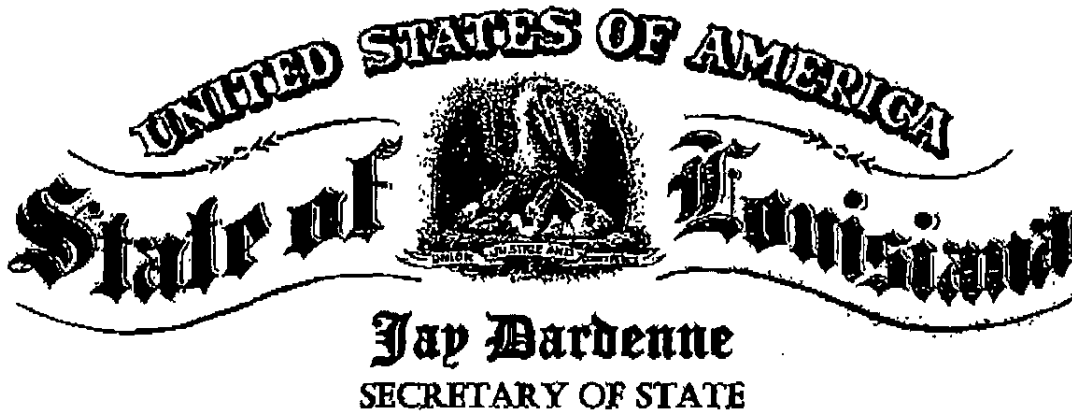
13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. P DALE LADNER

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

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CLERK OF SUPERIOR COURT
JASSEL FLORIDA



As Secretary of State of the State of Louisiana I do hereby Certify that

DEL CORPORATION

A corporation domiciled in SCOTT, LOUISIANA,

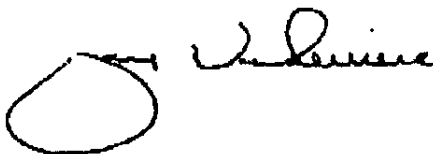
Filed charter and qualified to do business in this State on December 08, 1994,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

March 3, 2010


Secretary of State

Web GSC



Certificate ID: 10049038#FSK61

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed.
www.sos.louisiana.gov

STATE OF LOUISIANA
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