(Requestor's Name)	
(Address) (Address)	800170679038
(City/State/Zip/Phone #)	900170c70000
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(Business Entity Name)	03/17/1001019005 **2300.00
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ecial Instructions to Filing Officer:	26 PH 2: 26
Office Use Only	202011 1540 2200 1540 1540 1540 1540 1540 1540 1540 15

-COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: Best Diversified Products, 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:

Tosha Gibson			
(Name of Person)			
Best Diversified Products, Inc.			
(Firm/Company)			
107 Flint St.			
(Address)	2	\sim	_
Jonesboro, AR 72401	E.	2010 KAR	
(City/State and Zip code)	11.	AN	-
	((92	
For further information concerning this matter, please call:	Τ	_	e i j
	, • /.	Hd Hd	5 6 6
Tacha Aibean 870 022 1727		Ņ	•• •*

 $= at \left(\frac{8/0}{(\text{Area Code & Daytime Telephone Number})} \right)$ <u>IUSAA GIDSOA</u> (Name of Person)

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

d is a check for the following amount.

 \$78.75 Filing Fee & Certified Copy □\$87.50 Filing Fee, Certificate of Status & Certified Copy

15	COMPLIANCE WITH SECTION 607. IS03; FLORIDA STATUTES, THE FOLLOWING IS SU	RMITT	רא מד	
	EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLOR		0010	
1.:	Best Diversified Products Inc.			
	(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 but	isiness i	n Florida))
2.	AR 3. 71-0636387			
	(State or country under the law of which it is incorporated) (FEI number, if applicab	vie)		-
4	1986 s. Derpetual			
	(Date of incorporation) (Duration: Year corp. will cease to exist	st or "pe	rpetual")	
6.				
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		20	
		2-3-	H O	400
7	107 Flint St UCNESDON, AR 72401 (Principal office address)	<u></u>	HAR 2	аналаса *********
	-	0000 101-<	6	i.
-	(Current mailing address)	<u> </u>	PH	
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		a la F	\sim	

Name:	Corporation.	<u>Unice</u> company
Office Address:	Sol Adiai Sta	EnsonDr 1201 Hays Street
Tallanasse.	Springfield	IL -62703 32301
	(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 und complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sasou

(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 and business addresses of officers and/or directors:

A: DIRECTORS
Chairman: Wilfred & Gross Jr.
Address: 800 15th Street
Columbus GA 31903
Vice Chairman: N/A
Address:
Director: Tom Black
Address: 40 Spring Harbor Circle
Columbus 04 31904
Director: John D Pezold
Address: 600 Brookstone Center Parkway
Columbus GA 31904
B. OFFICERS
President: WHERE E CIESS JE TAMES E MARKLEY E
Address: 4109 Stephanie Lane
Angelono 40 J71161
Vice President: <u>N/N</u>
Address
Secretary: SCOTT BREDGEN
Address: 107 Flint St= CONSDORD AR 72401
Treasurer: N/A
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors
13. James & Markley
(Signature of Director or Officer listed in number 12 of the application)
14. (Typed or printed name and capacity of person signing application)
(Typed or prince name and capacity or person signing approximation)

i

A. DIRECTORS	
Director: Matthew D. Swift	
Address: 1017 Front St.	
Columbus, GA 31901	
Dikectorium: Vim Pate	
Address: 240 Brookstone Center Parkins	NU
Columbus, GA 31402	
Director: Chins Holstein	
Address: 1111 Bay Avenue Sink 400	
Columbus GA 31901	
Director: Bailey Gross	
200 Junit Stand	·
Columbus, GA 31903	
B. OFFICERS	20
President:	
Address:	
Vice President:	
Address:	
Secretary:	منابع والبر والمنافقة
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additio	nal officers and/or directors.
13(Signature of Director or Officer listed in number 12 of the ap	publication)
14	· · · · · · · · · · · · · · · · · · ·
(Typed or printed name and capacity of person signing appl	lication)

I.

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BEST

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

BEST DIVERSIFIED PRODUCTS, INC.

formed under the laws of the state of Georgia, and authorized to transact business in the State of Arkansas as a Foreign For Profit Corporation, was granted a Application for Certificate of Authority by this office September 9, 1986.

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 26th day of March 2010.

Charlie Daniels Secretary of State

Online Certificate Authorization Code: ed03h1397b28f6c To verify the Authorization Code, visit sos.arkansas.gov