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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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CAPAGNISH OF STATE DIVISION OF CORPORATIONS
TALLAMASSEE, FLORIDA





COVER LETTER

	of Corporations							
SUBJECT: H	ALAS STRUCTURES, INC.							
Name of corporation - must include suffix								
Dear Sir or Mada	m:							
"Certificate of Ex	oplication by Foreign Corporation for Authorization to Transact Business in Florida," sistence," or "Certificate of Good Standing" and check are submitted to register the foreign corporation to transact business in Florida.							
Please return all	correspondence concerning this matter to the following:							
GREG COL	LINS							
	Name of Person							
EASY LICE	ENSE, LLC							
	Firm/Company							
PO BOX 1	80005							
	Address							
TALLAHAS	SEE, FL 32318							
	City/State and Zip code							
khalas@hala	sstructures.com							
	E-mail address: (to be used for future annual report notification)							
For further inform	nation concerning this matter, please call:							
GREG COL	LINS at (850) 745-0391							
Name of	Person Area Code & Daytime Telephone Number							
New Filii Division Clifton B 2661 Exe	MAILING ADDRESS: Ing Section Of Corporations uilding Cutive Center Circle ee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314							
Enclosed is a che	ck for the following amount:							
√ \$70.00 Filing	g Fee \$\int_{\text{S78.75 Filing Fee & Certificate of Status}} \int_{\text{S78.75 Filing Fee & Certificate of Status}} \int_{\text{S78.75 Filing Fee & Certificate of Status & Certified Copy}} \int_{\text{S87.50 Filing Fee, Certified Copy}} \int_{\text{Certified Copy}} \int_{\te							

, 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.

I. HALAS STRU	ICTURES, INC.					-
	orporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATION,"			
"lnc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")					
HALAS STR	UCTURES OF TEXAS, INC					_
(If name unavaila	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting busi	ness in Fl	orida)	
2. TEXAS		_ 3.	27-2313582			-
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)		
4. 04-06-2010		5.	PERPETUAL			_
(Date	of incorporation)		(Duration: Year corp. will cease to exist	or "perpe	tual")	
6. UPON REG	ISTRATION					_
			n Florida, if prior to registration)			
	(SEE SECTIONS 607.1501 & 60	17.13	502, F.S., to determine penalty liability)			
7. 3002 LA QI	JINTA DRIVE, MISSOURI (· · · · · · · · · · · · · · · · · · ·			_
	(Principal office	add	ress)			
3002 LA Q	UINTA DRIVE, MISSOUF	स (CITY, TX 77459			_
	(Current mailing	add	ress)		5	
				12-14	AON	សាលក្នុក
· · · · · · · · · · · · · · · · · · ·	l Lawful Business			5- m."	~	- 902 mm
(Purpose(s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)		2	1
9. Name and stree	t address of Florida registered agent: ((P.C	D. Box NOT acceptable)	177 BE	至	1
Name:	Bert L Halas IV			0.5	₹.	-
7 (277)				書名	<u>5</u> 0	
Office Address:	7171 COOLIDGE STREET			n the		
	HOLLYWOOD		, Florida 33024			
	(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.

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: Address: Vice Chairman: Address: Director: Address: __ Director: Address: __ **B. OFFICERS** President: KIMBERLY HALAS Address: 3002 LA QUINTA DRIVE MISSOURI CITY, TX 77459 Vice President: KEVIN HALAS Address: 3002 LA QUINTA DRIVE MISSOURI CITY, TX 77459 Secretary: Address: __ Treasurer: _ Address: ary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. KEVIN HALAS

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

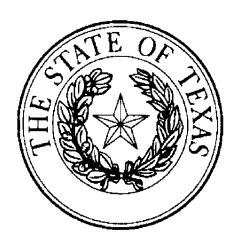
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for HALAS STRUCTURES, INC. (file number 801252421), a Domestic For-Profit Corporation, was filed in this office on April 06, 2010.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 27 2010.

NOV -2 M TO SIL

Hope Andrade Secretary of State



Phone: (512) 463-5555

Prepared by: SOS-WEB

Fax: (512) 463-5709 TID: 10264