

F11000001358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

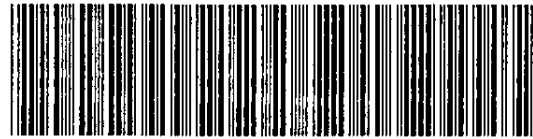
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500197233735

03/14/11--01037--007 **87.50

26251-1111

FILED
2011 MAR 28 PM 4:41
TALLAHASSEE, FLORIDA

T. Burch MAR 30 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RECO LIMITED
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:

Chris Kibler
Name of Person
RECO LIMITED
Firm/Company
20080 Mennonite Road
Address
Gulfport, MS 39503
City/State and Zip code
Chris@recolimited.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Kibler at (228) 831-0904
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

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 MAR 28 AM 11:47

DIVISION OF CORPORATIONS

March 16, 2011

CRIS KIBLER
20080 MENNONITE ROAD
GULFPORT, MS 39503

SUBJECT: RECO LIMITED
Ref. Number: W11000015272

We have received your document for RECO LIMITED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Regulatory Specialist II

Letter Number: 711A00006472

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. RECO LIMITED Corp.
(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)

2. MS 3. 640 86 7150
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/31/95 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 20080 Mennonite Road Gulfport, MS 39503
(Principal office address)

Same
(Current mailing address)

8. to conduct lawful business including but not
(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: Chris Kibler

Office Address: 770 Hwy 98 # C3

Destin, Florida
(City)

32551
(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: _____ C. H. Kibler
20080 Mennonite Road
Gulfport, MS 39503

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____ C. H. Kibler
20080 Mennonite Road
Gulfport, MS 39503

Director: _____

Address: _____

B. OFFICERS

President: _____ C. H. Kibler
20080 Mennonite Road

Address: _____ Gulfport, MS 39503

Vice President: _____

Address: _____

Secretary: _____ C. H. Kibler
20080 Mennonite Road

Address: _____ Gulfport, MS 39503

Treasurer: _____ C. H. Kibler
20080 Mennonite Road

Address: _____ Gulfport, MS 39503

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

13.  _____

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. Chris Kibler, President/Director/Secretary _____

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

State of Mississippi
Office of the Secretary of State
C. Delbert Hosemann, Jr., Secretary of State
Jackson, Mississippi

2011 MAR 28 PM 4:41

CERTIFICATE

I, C. DELBERT HOSEMAN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on October 31, 1995, the State of Mississippi issued a Charter/Certificate of Authority to:

RECO LIMITED

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand
and seal of office
March 10, 2011

C. Delbert Hosemann, Jr.

C. Delbert Hosemann, Jr.
Secretary of State