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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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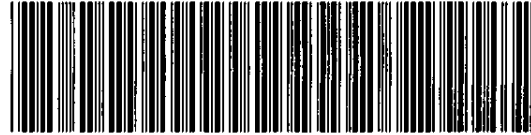
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR -4 PM 1:07

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AND
FILED

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Industrial Elevator Services, 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:

Doris Harrison

Name of Person

Industrial Elevator Services, Inc.

Firm/Company

14875 S. Turnberry Street

Address

Olathe, KS 66061

City/State and Zip code

dharrison@hoistco.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Doris Harrison

Name of Person

at (863) 402-1433

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

**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. Industrial Elevator Services, Inc.

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

Industrial Elevator Services of Florida, Inc.

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

2. Kansas - Johnson County

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

3. 27-4312963

(FEI number, if applicable)

4. 12/16/2010

(Date of incorporation)

5. perpetual

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

6. approximate - June 2011

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

7. 14875 S. Turnberry Street, Olathe, KS 66061

(Principal office address)

14875 S. Turnberry Street, Olathe, KS 66061

(Current mailing address)

8. installation of special purpose elevators - labor only

(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: John Harrison

Office Address: 4447 Mendavia Dr.

Sebring

(City)

, Florida 33872

(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.

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TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: Kevin Harrison

Address: 14875 Turnberry Street
Olathe, KS 66061

Vice Chairman: John Harrison

Address: 4447 Mendavia Dr.
Sebring, FL 33872

Director: Doris Harrison

Address: 4447 Mendavia Dr.
Sebring, FL 33872

Director: _____

Address: _____

B. OFFICERS

President: Kevin Harrison

Address: 14875 S. Turnberry Street
Olathe, KS 66006

Vice President: _____

Address: _____

Secretary: John Harrison

Address: 4447 Mendavia Dr., Sebring, FL 33872

Treasurer: Doris Harrison

Address: 4447 Mendavia Dr., Sebring, FL 33872

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. Doris Harrison

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

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AND
FILED

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that
according to the records of this office.

Business Entity ID Number: 4473443

Entity Name: INDUSTRIAL ELEVATOR SERVICES, INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: KEVIN M. HARRISON

Registered Office: 14875 S. TURNBERRY STREET, OLATHE, KS 66061

was filed in this office on December 16, 2010, and is in good standing, having fully
complied with all requirements of this office.

No information is available from this office regarding the financial condition, business
activity or practices of this entity.



In testimony whereof I execute this certificate and affix
the seal of the Secretary of State of the state of Kansas
on this day of March 30, 2011

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 419807 - To verify the validity of this certificate please visit
<https://www.accesskansas.org/bess/flow/validate> and enter the certificate ID number.