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SECRETARY OF STATE

L Bureh MAY 1.7. 2011

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Herbert P. Sears Co., Inc.				
Name of corporation - must include suffix				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authorization to Transact B "Certificate of Existence," or "Certificate of Good Standing" and check are submit above referenced foreign corporation to transact business in Florida.	dusiness in Florida," ted to register the			
Please return all correspondence concerning this matter to the following:				
Chris Thompson				
Name of Person				
Herbert P. Sears Co., Inc.				
Firm/Company				
2000 18th Street				
Address	t* ·			
Bakersfield, CA 93301				
City/State and Zip code				
cthompson@hpsears.com				
E-mail address: (to be used for future annual report notif	fication)			
For further information concerning this matter, please call:				
Chris Thompson at (661) 283-0228				
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 ADD New Filing Section Division of Corpo Corpo P.O. Box 6327 Tallahassee, FL 3	on prations			
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

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		STATUTES, THE FOLLOWING IS SUBMITTED	
REGISTER A FO	REIGN CORPORATION TO TRANSACT	BUSINESS IN THE STATE OF FLORIDA.	
1. Herbert P. Se			- \$ 5
	corporation; must include "INCORPORATEL Corp," "Inc, " "Co," or "Corp."))," "COMPANY," "CORPORATION,"	31 <u>0</u>
inc., co., c	orp, rac, co, or corp. j		
HP Sears Co	2		
		e adopted for the purpose of transacting business in F	
2 California		95-1887051	
	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 05/12/1947	5	, perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "perpe	etual**)
6. N/A			
o. <u> </u>	(Date first transacted business	in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.	1502, F.S., to determine penalty liability)	
7. 2000 18th	Street Bakersfield, CA 93301		
	(Principal office ad	•	
2000 18th	Street Bakersfield, CA 9330		
	(Current mailing ad	dress)	
R. Debt Colle	octions		
	s) of corporation authorized in home state or o	country to be carried out in state of Florida)	
	•	•	
y. Name and <u>stree</u>	et address of Florida registered agent: (P.	O. Box NOI acceptable)	
Name:	NRAI Services, Inc.		
Office Address:	515 East Park Avenue		
	Tallahassee		
	(City)	, Florida 32301 (Zip code)	
	(City)	(Zip codo)	
Having been nam designated in this further agree to c	application, I hereby accept the appoint omply with the provisions of all statutes	vice of process for the above stated corporation of tment as registered agent and agree to act in thi relative to the proper and complete performanc	is capacity. I
and I am familiar —	with and accept the obligations of my p NRHI Services, I	Wendy D Rea, Assistant Secretary	
	Revistered agent's signature	a)	

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:	記さ	A
	42	6
Address:	<u> </u>	골
	20.E	+-
Director:		5
Address:		
Director:		
•		
Address:		
D. OFFICE D.		
B. OFFICERS		
President: Patrick Collins		
Address: 2008 Norwich Way		
Bakersfield, CA 93311		
Vice President:		
Address:		
Secretary: Terri Collins		
Address: 2008 Norwich Way Bakersfield CA 93311		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction listing additional officers and listing additional offic	ectors.	
Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts are true and that he or she is aware that false information submitted in a document to the Department of St third degree felony as provided for in s.817.155, F.S.		
14 Patrick Collins President		

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

HERBERT P. SEARS CO., INC.

FILE NUMBER:

C0216823

FORMATION DATE:

05/12/1947

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

SECRE LARY OF STATE

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

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



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 06, 2011.

DEBRA BOWEN Secretary of State