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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Malone Finkle Eckhardt & (Collins, Inc.			
Name of corporation -				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standa above referenced foreign corporation to transact business	ing" and check are submitted to register the			
Please return all correspondence concerning this matter to	o the following:			
Stacie Ramos				
Name of Po	erson			
Malone Finkle Eckhardt & Collins, In	c.			
Firm/Comp	any			
2040 East Sunshine Street				
Addres	S			
Springfield, Missouri 65804				
City/State and	d Zip code			
sramos@mfec.com				
E-mail address: (to be used fo	r future annual report notification)			
For further information concerning this matter, please cal	ll:			
Stacie Ramos at (417	, 881-0020			
Stacie Ramos at (417) 881-0020 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:				
	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of	le Eckhardt & Collins, Inc. corporation; must include "INCORPORAT Eorp," "Inc," "(Co," or "Corp:")	ED," "COMPANY;" "CORPORATION,"	
(If name unavai	Table in Florida, enter alternate comporate no	ame adopted for the purpose of transacting business in Florida)	
12. Missouri	nioro III I forfatti, estat aita intito doi portato He	3. 431492982	
	under the law of which it is incorporated)	(FEI number, if applicable)	
4, 09/27/1988		5. Perpetual	
	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6.		•	
		ss in Florida, if prior to registration) 7:1502, F.S., to determine penalty liability)	•
- 2040 Fast	Sunshing Street Springfield	. Missouri 6580/	
7.2040 East	Sunshine Street, Springfield (Principal office		ge a managa a ji dara man - o mana managa an
<u>7.,</u> 2040.East			iga di manananingi di dirang Tanan di mananan di mananan
_{7.,} 2040 East		address)	iga di manamaningi di disensi manamaningi di manamaningi di manama
	(Principal office) (Current mailing	address)	
8. Consulting	(Principal office) (Current mailing)	address)	SEC
8. Consulting	(Principal office) (Current mailing)	address)	SECRETAR DIVISION OF
8. Consulting	(Principal office) (Current mailing) (Current mailing) (Current mailing) (Current mailing) (Current mailing) (Current mailing)	address) address) or country to be carried out in state of Florida) P.O. Box NOT acceptable)	
8. Consulting (Purpose) 9. Name and stre	(Principal office (Current mailing Engineering s) of corporation authorized in home state of et address of Florida registered agent: (address) or country to be carried out in state of Florida) P.O. Box NOT acceptable)	2 RPC
8. Consulting (Purpose) 9. Name and stree	(Principal office (Current mailing Engineering s) of corporation authorized in home state of et address of Florida registered agent: (NRAI Services, In	address) or country to be carried out in state of Florida) P.O. Box NOT acceptable)	

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.

LONIQUEUR (ASSTSECTY) OF NRAI SERVICES IIN

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: Vice Chairman: Address: __ Director: Address: __ Director: **B. OFFICERS** President: ***SEE ATTACHED SHEET Address: ______ Vice President: Address: _____ Secretary: ___ Address: ___ Treasurer: NOTE: If necessary, 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. Cameron K. Collins, V.P.

1.	OWNER'S NAME Rodney L. Finkle	OWNER ADDRESS 2040 E. Sunshine Springfield, MO 65804
2. ′	OWNER'S NAME Cameron K. Collins	OWNER ADDRESS 2040 E. Sunshine Springfield, MO 65804
3.	OWNER'S NAME Jon E. Eckhardt	OWNER ADDRESS 2040 E. Sunshine Springfield, MO 65804
4.	OWNER'S NAME Terrence P.Maskil	OWNER ADDRESS 8700 Indian Creek Parkway Suite 180 Overland Park, KS 66210
5.	OWNER'S NAME Michael R. Thome	OWNER ADDRESS 8700 Indian Creek Parkway Suite 180 Overland Park, KS 66210
6.	OWNER'S NAME Jennifer A. Luce	OWNER ADDRESS 2040 E. Sunshine Springfield, MO 65804

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STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

MALONE FINKLE ECKHARDT & COLLINS, INC. 00319804

was created under the laws of this State on the 27th day of September, 1988, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 6th day of May, 2011

Alm Chahan Secretary of State

Certification Number: 13817121-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp