

F11000005116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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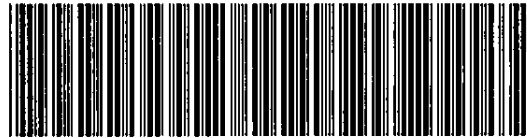
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: HINKS CORP
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:

JOSEPH HINKLE
Name of Person
Hinks Corp
Firm/Company
17327 ALLAMANDA DR
Address
SUGARLOAF KEY, FL, 33042
City/State and Zip code
JOE@JOEHINKLE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOE HINKLE at (256) 426 8713
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

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

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

2. ALABAMA 3. 20-5400882
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. AUG 12, 2006 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 17327 ALLAMANDA DR SUGARLOAF KEY, FL 33042
(Principal office address)

17327 ALLAMANDA DR SUGARLOAF KEY, FL 33042
(Current mailing address)

8. SOFTWARE DEVELOPMENT
(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: In Corp SERVICES INC

Office Address: 17888 67th COURT NORTH
LOXAHATCHEE, Florida 33470
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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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.

Amber Ragland Amber Ragland on behalf of Incorp Services, Inc.
(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

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AND
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Chairman: _____

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Address: _____

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOE HINKLE

Address: 4800 WHITESBURG DR STE 30-273
HUNTSVILLE AL 35802

Vice President: MARGARET HINKLE

Address: 4800 WHITESBURG DR STE 30-273
HUNTSVILLE AL 35802

Secretary: JOE HINKLE

Address: SEE ABOVE

Treasurer: MARGARET HINKLE

Address: SEE ABOVE

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. JOE HINKLE, PRESIDENT

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



APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Alabama

Department of Revenue

Certificate of Good Standing

Hinks Corp is in compliance with the Alabama business privilege tax payment and return requirements in Chapter 14A, Title 40, Code of Alabama 1975 as of the date of issuance. This certificate is valid for sixty days from the date of issuance.

*IN WITNESS WHEREOF, I hereunto set my hand this
date of December 08, 2011.*

Director, Individual and Corporate Tax Division

ATTEST:

Secretary

Business Privilege Tax

Phone: 334-353-7923

Fax: 334-242-8915

Request Date: December 08, 2011

Request Code: 1112084589429