# F12000000122

(Requestor's Name)
(Address)
<u> </u>
(Address)
' (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
. [





200215464012

01/09/12--01049--016 \*\*70.00

SECRETARY OF STATE

2 JAN -9 PM 8; 1c



# **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: KNIGHT COMMUNICATIONS, 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:
SHERRY BROOKS
Name of Person
KNIGHT COMMUNICATIONS, INC.
Firm/Company
10150 MALLARD CREEK RD., STE 201
Address
CHARLOTTE, NC 28262-4518
City/State and Zip code
sherry@baxterknight.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHERRY BROOKS at ( 704 ) 568-7804
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building Clifton Buildin
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \text{Certificate of Status} \tag{\$78.75 Filing Fee & Certified Copy} \tag{\$87.50 Filing Fee, Certified Copy} \tag{\$87.50 Filing Fee, 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.

l.	KNIGHT COM	MUNICATIONS, INC.				_
		rporation; must include "INCORPORA"	ΓED.	" "COMPANY," "CORPORATION,"		_
	"lnc.," "Co.," "Co	rp," "Inc," "Co," or "Corp.")				
		COMMUNICATIONS, INC.				_
	(If name unavailal	ble in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business	in Florida	)
	NORTH CAR		_ 3.	56-1988960		
	(State or country u	inder the law of which it is incorporated)		(FEI number, if applicable)		
4.	10-01-1996		5.	PERPETUAL		
	(Date of	of incorporation)	_	(Duration: Year corp. will cease to exist or "p	erpetual")	_
6.	10-01-2011					_
				n Florida, if prior to registration)		
		•		502, F.S., to determine penalty liability)		
7.	10150 MALI			CHARLOTTE, NC 28262-4518	<u> </u>	_
		(Principal office	add	ress)		
	10150 MAL	LARD CREEK RD., STE	20	D1 CHARLOTTE, NC 28262-	4 <u>5</u> ,18	· · · · · · · · · · · · · · · · · · ·
		(Current mailing	add	ress)		- ス -
					全部	11.
8.	·	ING SALES			<u> </u>	
	(Purpose(s)	of corporation authorized in home state	or co	ountry to be carried out in state of Florida)	H <sub>S</sub>	-D
9.	Name and street	address of Florida registered agent:	(P.C	D. Box NOT acceptable)		òò ⊒a:
	Name:	ROBIN P. JONES				Ţ,
	ranio,	•		<del></del>		Nation 1
Oi	ffice Address:	218 COMMERCIAL BLVD.	<u>ST</u>	<u>E D</u>		
		FT. LAUDERDALE BY THE	E SI	EA Florida 33308		
		(City)		(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:



Α.	DH	REC	T(	)RS

12 JAH -9 PM 8: 19

Address:	GECENTARY OF STA
	TALLAMASTEE. HUM
e Chairman:	
Iress:	
ector:	
dress:	
rector:	
dress:	
OFFICERS	
sident: RANDALL B. KNIGHT	
dress: 10150 MALLARD CREEK RD., STE 201	
CHARLOTTE, NC 28262-4518	
e President:	
dress:	
cretary:	
dress:	
easurer:	
dress:	
OTE: If necessary, you may attach an addendum to the application	listing additional officers and/or directors.
Signature of Director or C	

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. RANDALL B. KNIGHT, PRESIDENT



# NORTH CAROLINA Department of the Secretary of State

#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

## KNIGHT COMMUNICATIONS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 4th day of September, 1996, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City? of Raleigh, this 7th day of November, 2011

Elaine & Marshall

Secretary of State