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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	:			
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FOREIGN PROFIT/NONPROFIT CORPORATION L-CON, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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1/13/2012

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: L-Con, Inc.	
	poration - must include suffix
Dear Sir or Madam:	
	ion for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this	matter to the following:
Mark Wost	** **
N	ame of Person
L-Con, Inc.	
Fir	т/Сотрапу
PO Box 16390	
	Address
Little Rock, AR 72231	
City	State and Zip code
mark@lexgrpinc.com	
E-mail address; (to b	e used for future annual report notification)
For further information concerning this matter, p	please call:
Mark West at (_5	01 \ 490-4200
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:	
S70.00 Filing Fee S78.75 Filing Fee & Certificate of State	

FLOID - 43/04/2014 CT System Online



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT 3 AM II: 55 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. L-Con, Inc.		
"Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	"," "COMPANY," "CORPORATION,"
(Ifnema lineva)	lable in Whytele autor strawite	s adopted for the purpose of transacting business in Plorida)
	•	•
Texas	under the law of which it is incorporated)	20-4969045
	,	
5/26/2006	5.	Perpetual (Duration: Year corp. will cause to exist or "perpetual")
(Date	of incorporation)	(Direction: Year corp. will coase to exist or "perpetual")
*	Company of the second of head and	in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 607.1	in Fibrica, if prior to tegistration) 1502, F.S., to determine penalty liability)
8900 Fourche Da	am Pike, Little Rock, AR 72206	· · ·
* 	(Principal office add	iress)
PO Box 16390, I	Little Rock, AR 72231	
	(Current mailing add	dreas)
Construction	s) of corporation authorized in home state or o	·
(Purpose(s) of corporation authorized in home state or c	ountry to be carried out in state of Florids)
. Name and stree	et address of Florida registered agent: (P.	D. Box <u>NOT acceptable)</u>
Nams:	C T Corporation System	
Office Address:	1200 South Pine Island Road	
	Plantation	Ploride 33324
•	(City)	, Plorida 33324 (Zip code)
laving been nam lesignated in this urther agree to c	application, I hereby accept the appoint omply with the provisions of all statutes i with and accept the obligations of my pro- CT Corporation System	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my duth osition as registered agent. Katheine Laden, Asst. Sec.
	(Registered agent's signature)
1. 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 Scoretary of State or other official having custody of corporate records in the jurisdiction

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under the law of which it is incorporated.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 JAN 13 AM 11:55

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

A. DIRECTORS
Chalcman: Thomas B. Schueck
Address: 8900 Fourche Dam Pike, Little Rock, AR 72206
Vice Chairman;
Address:
Director:
Address:
,
Director;
Address:
B. OFFICERS
President: Mark A. Posvler
Address: 8900 Fourche Dam Pike, Little Rock, AR 72206
Vice President: Mark West
Address: 8900 Fourche Dam Pike, Little Rock, AR 72206
Address:
Secretary: Jeff D, Weatherty
Secretary: Jeff D. Weatherty Address: 8900 Fourche Dem Pike, Little Rock, AR. 72206
Treasurer:
Address:
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 follows as provided for in s.817.155, F.S.
14. Mark West, VP Que to a consolity of person signing application)

PLOIS - 03/31/2014 C T Syriem College



Hope Andrade Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for L-Con, Inc. (file number 800660837), a Domestic For-Profit Corporation, was filed in this office on May 26, 2006.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 13, 2012.

Hope Andrade

Secretary of State

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Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 404321810003

Phone: (512) 463-5555

Prepared by: SO\$-WEB