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

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### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: OutServ 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:
Name of Person
Outserv Inc.
1033 State Rte 31
Address
Macedon, Ny 14502
City/State and Zip code
Kdapprich@outservinc.com  E-mail address: (to be used for future annual report notification)
one made of
For further information concerning this matter, please call:
Name of Person at (315) 986-3776 X 125  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301  Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \text{Certificate of Status} \text{\$\frac{1}{2}\$\$}\$\$ \$78.75 Filing Fee & \text{Certificate of Status} \text{\$\frac{1}{2}\$}\$\$\$ \$87.50 Filing Fee, \text{Certificate of Status} & \text{Certified Copy} \text{\$\frac{1}{2}\$}\$\$



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2012

KELLY DAPPRICH 1033 STATE RTE 31 MACEDON, NY 14502

SUBJECT: OUTSERV, INC. Ref. Number: W12000039217

We have received your document for OUTSERV, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please list the street address of each officer/director.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 912A00019611

SECRETARY OF STATE CORPORATIONS

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## 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.		
Aut Sprit Time		,
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"		
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
2. New York 3. 16-1579004	•	
(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. 1/3/00 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. 1033 PiHStord-Palmyra Rd Mackdon, NY 14502 (Principal office address)		
1033 State Rte 31. Macedon, NV 14502		
* State RH31 is (Current mailing address) Pittsford-Palmyra Rd		ت
8. Expansion of business- data entry and customar service calls (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	12 A	Wish
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	्र	, m
Name: Paul Roussell Ja.	8	جد الد. حد الد
Office Address: 4906 Creekside Dr., Ste A	HA	480; 50,4
Clear water, Florida 33760	÷-	S7
(City) (Zip code)	26	
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		SWC
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 dutie	PC.	
and I am familiar with and accept the obligations of my position as registered agent.	-,	
Tal & Kurell		
(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	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS	
Chairman:	OLAISIUM OF P	URPUNATIONS
Address:	12 AUG -8	PM 4: 26
Vice Chairman:		<u> </u>
Address:		
Director:	<del></del>	
Address:		
Director:	<u>.</u>	
Address:		
B. OFFICERS		
President: Terry Dapprich	····	
1023 Ctala Plan	•	
Macedon, NY 14502		
Vally Degavich	<u>.</u>	
Address: 1033 State Rte 31		
Macedon, NY 14502		
Secretary: Kelly Dapprich		<u> </u>
Address: See above		<u> </u>
Treasurer: Terry Dapprich		<del></del>
Address: See abone		
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and/	or directors.
13. Fally & Daspirel Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 12 ab are true and that he or she is aware that false information submitted in a docume third degree felony as provided for in s.817.155, F.S.		
14. Kelly L Dapprich (Typed or printed name and capacity of person signing)	onnlication)	
(1) ped of printed name and capacity of person signing	appiivativii)	

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of OUTSERV INC. was filed on 01/03/2000, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of July two thousand and twelve.

First Deputy Secretary of State