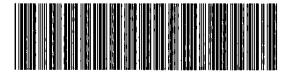
F120000004535

(Requestor's Name)			
(Address)			
(Address)			
(City	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to F	Filing Officer:		

Office Use Only



300241128873

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12 NOV -7: AM 8: 25

mD 11/8

COVER LETTER

TO:	New Filing Sect Division of Corp			
SUBJI	ECT: WHITE	E SIGN COMPAN	Y, INC.	
			tion - must include suffix	
Dear Si	ir or Madam:			
"Certif	icate of Existence	• • •	for Authorization to Transact Standing" and check are subminess in Florida.	
Please	return all correspo	ondence concerning this ma	tter to the following:	
JAMI	ES DAVIS			
		Name	of Person	
UNI	TED CRS			
	· · · · · · · · · · · · · · · · · · ·	Firm/C	Company	
327	HOLLOW	CREEK LN		
		A	ddress	
HAV	ANA, FL 32	333		
		City/Sta	te and Zip code	
cc@u	unitedors.com	1		
		E-mail address: (to be us	ed for future annual report no	tification)
For fur	ther information o	concerning this matter, plea	se call:	
Jame	es Davis	at (850	322-7117	
	Name of Person		ea Code & Daytime Telephor	ne Number
	STREET/COUNTY ST	corations Center Circle	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallanassee, FL	cion porations
Enclose	ed is a check for t	he 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

ΙΝ	COMPLIANCE	WITH SECTION 607.1503, FLORIDA	SI	TATUTES, THE FOLLOWING IS SUB		FO Z	• •
RI	EGISTER A FOR	EIGN CORPORATION TO TRANSACT	E	SUSINESS IN THE STATE OF FLORE	DA.	MON	
1.	White Sign Co					_ 1_	4
		rporation; must include "INCORPORATE! rp," "Inc," "Co," or "Corp.")	D,²	" "COMPANY," "CORPORATION,"	باز میراند در میراند در میراند	AM 8:	
	White Sign Co	ompany of Texas, Inc				29)
	(If name unavailal	ble in Florida, enter alternate corporate nam	ıe	adopted for the purpose of transacting but	siness in Fl	orida)	
2.	Texas	:	3.	46-1257862			
	(State or country u	inder the law of which it is incorporated)		(FEI number, if applicab	le)		
4.	10/1/2012	•	5.	PERPETUAL			
	(Date	of incorporation)		(Duration: Year corp. will cease to exis	t or "perpe	tual")	
6.	Upon Regist	ration					
		(Date first transacted business		n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
	00051 10	TX.		502, 1.3., to determine penalty intention			
7.	6205 Lost C	reek, Texarkana, 2 75503					
		(Principal office a		•			
	6205 Lost	Creek, Texarkana, 😂 755	5(03			
		(Current mailing a	dd	tress)			
	Any and All	I Jawful Rusiness					
8.		I Lawful Business of corporation authorized in home state or	~	ountry to be carried out in state of Florida	<u> </u>		
		•		•	,		
9.	Name and street	t address of Florida registered agent: (F	۷.C	D. Box NOT acceptable)			
	Name:	UNITED CRS		<u></u>			
o	ffice Address:	327 HOLLOW CREEK LN					
		HAVANA		Florida 32333			
		(City)		, Florida 32333 (Z'p code)			
_			٠				

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:

A. DIRECTORS	
Chairman:	200 7 0
Address:	2 -
	<u> </u>
Vice Chairman:	700
	32 29
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: BOBBY WHITE	
Address: 6205 LOST CREEK	
TEXARKANA, TX 75503	
Vice President: TODD WHITE BRAD WHITE	
Address: 6205 LOST CREEK	
TEXARKANA, TX 75503	
Secretary: DEBBIE WHITE	
Address: 6205 LOST CREEK, TEXARKANA, TX 75503	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.
13. Solly wwhite	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms the	at the facts stated herein
are true and that he or she is aware that false information submitted in a document to the Depart	

14. BOBBY WHITE

third degree felony as provided for in s.817.155, F.S.

Corporations Section
 P.O.Box 13697
 Austin, Texas 78711-3697



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 White Sign Company, Inc. (file number 801662591), a Domestic For-Profit Corporation, was filed in this office on October 01, 2012.

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 November 06, 2012.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Hope Andrade Secretary of State