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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

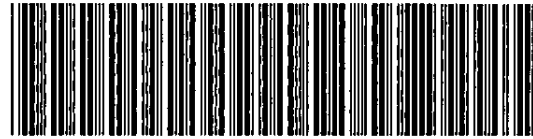
(Business Entity Name)

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TALLAHASSEE, FLORIDA

K 12/18/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SI Partners, 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:

Otis Schooley

Name of Person

SI Partners, Inc.

Firm/Company

79010 Mission Dr West

Address

La Quinta CA, 92253

City/State and Zip code

sipartners@sipartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Otis Schooley

Name of Person

at (760) 625-1151

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. SI Partners, Inc.

(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. California

(State or country under the law of which it is incorporated)

3. 33-0840990

(FEI number, if applicable)

4. January 4, 1999

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

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

7. 79010 Mission Dr. West, La Quinta, CA 92253

(Principal office address)

79010 Mission Dr. West, La Quinta, CA 92253

(Current mailing address)

8. Consulting Services to Fort Lauderdale Hollywood International Airport

(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: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470

(City)

(Zip code)

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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.

[Signature] 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

Chairman: Susan C. Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

Vice Chairman: Otis B Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Susan C. Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

Vice President: Otis B Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

Secretary: Otis B Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

Treasurer: Otis B Schooley
Address: 79010 Mission Dr. West, La Quinta, CA 92253

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Susan C. Schooley
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. Susan C. Schooley, Chairman
(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

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TALLAHASSEE, FLORIDA

ENTITY NAME:

SI PARTNERS

FILE NUMBER: C2099208
FORMATION DATE: 01/04/1999
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 30, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State