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4099 W13000007341



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02/04/13--01022--003 **70.00

DIVISION OF CORPORATIONS
13 MAR -8 PH 4: 37

3/2/13

COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: Wilson Farm Inc.	ion must include suffix	
Name of corporat	ion - must include suffix	•
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation is "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	Standing" and check are submitted to register the	"
Please return all correspondence concerning this ma	atter to the following:	
Daniel W. Schreimann		
Name	of Person	
Hoffman Kaliser Messina & Sc	chreimann	
Firm/C	Company	
17950 Preston Rroad, Suite		
Ad	idress	
Dallas, Texas 75252		
City/Stat	te and Zip code	
dschreimann@hkmlawyers.com		
E-mail address: (to be use	ed for future annual report notification)	
For further information concerning this matter, please	se call:	
Daniel W. Schreimann at 214	420-7326	-
Name of Person Are	ea Code & Daytime Telephone Number	SECRE TSION
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	RETARY OF STATE IN OF CORPORATIONS AR -8 PM 4: 37
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee & Certified Copy Certified Copy	status &



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2013

DANIEL W. SCHREIMANN 17950 PRESTON ROAD SUITE 230 DALLAS, TX 75252

SUBJECT: WILSON FARM, INC. Ref. Number: W13000007341

We have received your document for WILSON FARM, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name 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: 013A00002924

SECRETARY OF STATE
DIVISION OF CORPORATIO

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.

_	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ss in Florida)
Texas	3	73-1685378	
•	under the law of which it is incorporated)	(FEI number, if applicable)	
October 1		'	
,	of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")
January 1			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
21000 S.V	V. 280th Street, Homeste	ad, FL 33031	
	(Principal office ad	······································	
21000 S.V	V. 280th Street, Homestead	d, FL 33031	
	(Current mailing add	dress)	
AA#			
	e plant growing	CPI :I	· · · ·
(Purpose(s)) of corporation authorized in home state or c	country to be carried out in state of Florida)	
Name and stree	t address of Florida registered agent: (P.	O. Box NOT acceptable)	<u> </u>
Name:	Thomas M. Wilson		MAR
ffice Address:	21000 S.W. 280th Stree	 et	8
ince Address.		331131	
nce Address.	Homestead	, Florida 33031	-E
nice Address.	Homestead (City)	, Florida (Zip code)	¥ 4: 37

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: Thomas M. Wilson 13 MAR -8 PM L: 27 Address: 21000 S.W. 280th Street, Homestead, FL 33031 Vice Chairman: Cristina Wilson Address: 21000 S.W. 280th Street, Homestead, FL 33031 **B. OFFICERS** President: Cristina Wilson Address: 21000 S.W. 280th Street, Homestead, FL 33031 Vice President: Address: _ Secretary: Cristina Wilson Address: 21000 S.W. 280th Street, Homestead, FL 33031 Treasurer: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Thomas M. Wilson

(Typed or printed name and capacity of person signing application)

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



John Steen Secretary of State

Office of the Secretary of State

Certificate of Fact

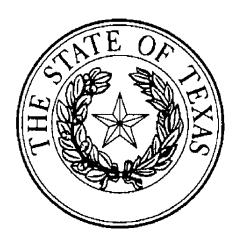
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for WILSON FARM, INC. (file number 800253155), a Domestic For-Profit Corporation, was filed in this office on October 01, 2003.

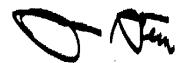
It is further certified that the entity status in Texas is in existence.

DIVISION OF CORPORATIONS

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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 24, 2013.





John Steen Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 462866230003