

F 13000002850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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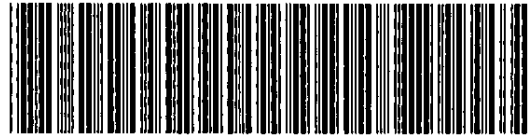
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
13 JUN 28 PM 4:45

7/1/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: **CLEARWATER SERVICES, 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:

PATRICK M. STROUD

Name of Person

CLEARWATER SERVICES, INC.

Firm/Company

P.O. BOX 982

Address

COUER D'ALENE, ID 83816

City/State and Zip code

STROUD09@AOL.COM

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

For further information concerning this matter, please call:

RICHARD R. DAY at (904) 823-5622

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:

- ☐ \$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

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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.*

1. CLEARWATER SERVICES, INC. _

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

CLEARWATER-STROUD, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. IDAHO

3. 82-0519167

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

(FEI number, if applicable)

4. 11/12/1999

5. PERPETUAL

(Date of incorporation)

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

6. ACTIVITY WILL COMMENCE UPON REGISTRATION

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

7. 4363 S. ARROWPOINT DRIVE, HARRISON, ID 83833

(Principal office address)

P.O. BOX 982 COEUR D'ALENE, ID 83816

(Current mailing address)

8. IMPORTER

(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: **RICHARD R. DAY**

Office Address: **132 SEMINOLE ROAD**

ST. AUGUSTINE

(City)

Florida - **32086**

(Zip code)

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.

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

A. DIRECTORS

Chairman:

Address: _____

Vice Chairman:

Address: _____

Director: **PATRICK M. STROUD**

Address: **4363 ARROWPOINT DRIVE
HARRISON, ID 83833**

Director: **IRENE BORN**

Address: **7712 N. HEARTLAND #11
COEUR D'ALENE, ID 83835**

B. OFFICERS

President: **PATRICK M. STROUD**

Address: **4363 ARROWPOINT DRIVE
HARRISON, ID 83833**

Vice President:

Address: _____

Secretary: **IRENE BORN**

Address: **7712 N. HEARTLAND #11
COEUR D'ALENE, ID 83835**

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

14.

PATRICK M. STROUD, PRESIDENT

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

Patrick M. Stroud, President
Pat M. Stroud

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN
ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(please print or type)

I, the undersigned **PATRICK M. STROUD** _____, do hereby certify
(Name)

that this Resolution of the Board of Directors of **CLEARWATER SERVICES, INC.**

(Name of Corporation)

a corporation duly organized and existing under the laws of **IDAHO**
(State or Country)

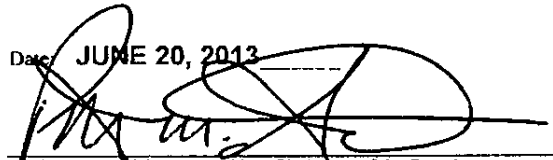
was adopted on **JUNE 20, 2013** _____, adopting the alternate

CLEARWATER-STROUD, INC.
name of _____

(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: **JUNE 20, 2013**


Signature of Chairman, Vice Chairman of the Board, a
director or any officer


Title of person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E126 (04/12)

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State of Idaho

Office of the Secretary of State

CERTIFICATE OF EXISTENCE

OF

CLEARWATER SERVICES, INC.

File Number C-131159

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the corporation records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named corporation was incorporated under the laws of Idaho on 11/12/1999.

I FURTHER CERTIFY That the corporation is in goodstanding on the records of this office.

Dated: 6/21/2013 4:13 PM



Ben Yursa

SECRETARY OF STATE

Authentic Access Idaho Document (<http://www.accessidaho.org/public/portal/authenticate.html>)
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