# C13000003488

(Requestor's Name)	,
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
:	mps
	8/15/

Office Use Only



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### **COVER LETTER**

	Filing Section on of Corpor							
SUBJECT:		Bizco Name of co	In	C.				
_		Name of co	rporat	ion - 1	nust inclu	de suffix		
Dear Sir or Ma	adam:							
"Certificate of	Existence,"	by Foreign Corport or "Certificate of Corporation to transa	iood S	Standii	ng" and ch	eck are su		•
Please return a	Il correspon	lence concerning th	iis ma	itter to	the follow	ving:		
		Jeff B	lair					
			Vame	of Per	son			
		Bizu, 1	N.					
		F	irm/C	Compa	ny			
		7950 (	<b>D</b>	SY	treet			
,			Ac	idress		_		
		Linusla K	e	685	710			
		Cit	y/Stat	te and	Zip code			
		iblaira	) bi	200	. com		notification)	
		E-mail-hddress: (to	be use	ed for	future ann	ual report	notification)	ı
For further inf	ormation co	cerning this matter	, plea	se call	:			
Paul 7	7		77	7 、	Una-	473	1	
	of Person	at (_	Ar	ea Co	de & Dayı	ime Telepl	none Numbe	 r
					•	•		
New F Divisi Clifto	ET/COURI Filing Section on of Corpon Building Executive Ce	ations			Ne Di <sup>.</sup> P.C	w Filing S vision of C D. Box 632	Corporations	
	assee, FL 3				-	•		
Enclosed is a	check for the	following amount:						
□ \$70.00 Fili	ng Fee 🛚 🖺	\$78.75 Filing Fee Certificate of Sta			378.75 Fili Certified C	-	Certi	O Filing Fee, ficate of Status & fied 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. (Enter name of cor	poration; must include "INC	ORPORATED,	"COMPANY," "CORPORATION	ON,"
	p," "Inc," "Co," or "Corp.")			
(If name unavailab	le in Florida, enter alternate	corporate name	adopted for the purpose of transac	ting business in Florida)
2. Nel	oraska	3.	47-078251	4
(State or country ur	nder the law of which it is inc	corporated)	47-078251 (FEI number, if a)	pplicable)
4. 10/-	1/1994	5.	Perpetual	
(Date o	f incorporation)		(Duration: Year corp. will cease	e to exist or "perpetual")
6				
			a Florida, if prior to registration) 502, F.S., to determine penalty lial	bility)
7	7050	O Street	t Lincoln, NE 68	516
	(Prin	cipal office add	ress)	
	7950	O Street	+ Lincoln NE 689	510
	(Curr	rent mailing add	ress)	
8. <u>Te</u> d	hnology Handware	2 & Soz+	Nace Sales untry to be carried out in state of	
(Purpose(s)	of corporation authorized in	home state or co	untry to be carried out in state of	Florida)
9. Name and street	address of Florida register	red agent: (P.C	D. Box NOT acceptable)	7 SF 3
Name:	Danielle Zo	<u></u>	<del></del>	F1 SCRET
Office Address:	440 5. Gulfvi	en Blud, #	, Florida 33767 (Zip code)	FILED NG 12 PH CRETARY OF S CANASSEE, FL
	Clearnater Be	rach_	, Florida <u>33767</u>	. E. 2
	(City)		(Zip code)	3: 09 ATE ORIOA
10. Registered age	<u>-</u>	to against com-	ice of process for the above sto	
designated in this a further agree to cor	pplication, I hereby acce property with the provisions of	pt the appointi of all statutes i	nent as registered agent and a relative to the proper and com f my position as registered ag	ngree to act in this capacity. plete performance of my
	Damilly Jo	W		
_ <del></del>	(Rogi	istered agent's si	gnature)	

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. DIRECT	•	FILED
	Paul W. Zoz	13 AUC 10 -
Address:	440 S. Gulfview Blud, # 1802 Clearmater Beach, Fr 33767	SECRETARY DE CTATE
Vice Chairma	n:	
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICE	ERS	
President:	Paul W. Zoz	
	440 S. Buffriew Blud # 1802	
	Clearmater Beach FL 33767	
	n: Jeff Blair	
	4211 Eagle Rielge Rot	
	Lincoln, NE 68516	
	Jeff Blair	
		514
Address:	4211 Eagle Ridge Rd. Lincoln, NE 68 Jeff Blair	
	4211 Eaglellidge Rd. Lincoln, NE 6851	
NOTE: If n	necessary, you may attach an addendum to the application listing	additional officers and/or directors.
13	Signature of Director of Officer	
The officer of are true and	or director signing this document (and who is listed in number 12 that he or she is aware that false information submitted in a document felony as provided for in s.817.155, F.S.	above) affirms that the facts stated herein ment to the Department of State constitutes
14	Paul W. Zoz Owner/Presid	
	(Typed or printed name and capacity of person signif	ng application)

## STATE OF NEBRASKA

United States of America, State of Nebraska } ss.

Secretary of State State Capitol Lincoln, Nebraska

I, John A. Gale, Secretary of State of the State of Nebraska, do hereby certify that

#### BIZCO, INC.

was duly incorporated under the laws of this state on October 7, 1994 and do further certify that no occupation taxes assessed are unpaid and no biennial reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

FILED

13 NUG 12 PH 3: 09

SECRETARY OF STATE
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

May 28, 2013

Secretary of State