# F1300003598

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Naı	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	_	

Office Use Only



500250668335

08/19/13--01011--002 \*\*87.50

13 AUG 19 PM 3: 39

SECRETARY OF STATE

Ps sterlis

### **COVER LETTER**

TO: New Filing Section		-	
Division of Corporations			
SUBJECT: Great Plains Service	es, Inc.		
SCENECT:	ration - must include	e suffix	-
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation" (Certificate of Existence," or "Certificate of Goo above referenced foreign corporation to transact	d Standing" and che		
Please return all correspondence concerning this	matter to the followi	ing:	
Lynne Jack			
	ne of Person	<u> </u>	-
Great Plains Services, Inc.			
Firm	n/Company		-
6580 W 95th Street Suite 10	2	•	
	Address		-
Overland Park, KS 66212			
	State and Zip code		_
lynne.jack@hotjobs4u.com			
E-mail address: (to be	used for future annu	ial report notification)	_
For further information concerning this matter, p	lease call:		
Lynne Jack 31, 91	754-8	870	
Name of Person	Area Code & Daytir	ne Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	New Divi P.O.	ILING ADDRESS:  Viling Section Sision of Corporations Box 6327 Shassee, FL 32314	
Enclosed is a check for the following amount:			
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status		<del>-</del>	s &

#### 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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	-
Miccouri	•	e adopted for the purpose of transacting business i	n Florida)
~~~	under the law of which it is incorporated)	. <u>26-9189792</u> (FEI number, if applicable)	
03/18/20	•	Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "po	erpetual")
	5th Street, Suite 102, Ove Principal office ad 5th Street, Suite 102, Over	dress)	<u>.</u>
0000 11 01	(Current mailing ad		
Staffing A	Agency		ಪ <sub>್ಪ</sub>
(Purpose(s	) of corporation authorized in home state or	country to be carried out in state of Florida)	
. Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)	9
Name:	Business Filings Incorpora	ated	PH ()
Office Address:	515 E. Park Avenue		3: <b>3</b> 9
	Tallahassee	Florida 32301	
	i aliatiassee	, Florida 3230 I	

#### 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.

Wary & Splinger Asst Secretary for Business filings (Registered agent's signature) Incorporated

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: Michael Jack Address: 6580 W 95th Street, Suite 102, Overland Park, KS 66212 Vice Chairman: Director: Michael Jack Address: 6580 W 95th Street, Suite 102, Overland Park, KS 66212 **B. OFFICERS** President: Michael Jack 6580 W 95th Street, Suite 102, Overland Park, KS 66212 Vice President: Address: Michael Jack 6580 W 95th Street, Suite 102, Overland Park, KS 66212 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. Michael Jack President (Typed or printed name and capacity of person signing application)

# STATE OF MISSOURI



Jason Kander Secretary of State

## CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

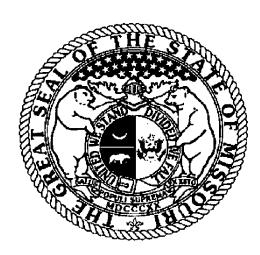
I, JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records i my office and in my care and custody reveal that

#### GREAT PLAINS SERVICES, INC. 00956433

was created under the laws of this State on the 18th day of March, 2009, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 6th day of August, 2013

Secretary of State



Certification Number: 15561750-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp