# F13000004301

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| Certified Copies          | Certificates                            | s of Status |
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| Special Instructions to F | iling Officer:                          |             |
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

| TO:  | New Filing Sec<br>Division of Cor |                            |                          |                          | •                                   |  |  |
|--|-----------------------------------|----------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
| SUBJ                                       | БСТ.                              | Tony                       | Bou                      | n 50n                    | Inc                                 | · .  |  |
| SUBJ                                       | ECI:                              | Tony                       | e of corporat            | ion - must ir            | clude suffix                        |  |  |
| Dear S                                     | ir or Madam:                      |                            |                          | ,                        |                                     |  |  |
| Dear S                                     | ir or iviadaiii:                  |                            |                          |                          |                                     |  |  |
| "Certif                                    |                                   | e," or "Certifica          | te of Good S             | tanding" an              | d check are sub                     | ct Business in Florida,"<br>omitted to register the                |  |
|  | return all corresp                |                            |                          |                          |                                     | •  |  |
| /  | Anthony                           | Bru                        | 1 (0/                    |                          |                                     |  |  |
|  | 111111                            | 10101                      | Name                     | of Person                |                                     |  |  |
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|  |                                   | E-mail addre               | ss: (to be use           | d for future             | annual report                       | notification)  |  |
| For fur                                    | ther information                  | concerning this            | matter, pleas            | se call:                 |                                     |  |  |
| 7  | Ony Br<br>Name of Perso           | un son                     | at (2/                   | 4, 3                     | 64-54                               | 15   |  |
|  | Name of Perso                     | n                          | Are                      | a Code & D               | aytime Teleph                       | one Number   |  |
|  |                                   |                            |                          |                          |                                     |  |  |
| STREET/COURIER ADDRESS: New Filing Section |                                   |                            |                          |                          | MAILING ADDRESS: New Filing Section |  |  |
| Division of Corporations                   |                                   |                            |                          | Division of Corporations |                                     |  |  |
|  | Clifton Buildin<br>2661 Executive |                            |                          |                          | P.O. Box 632'<br>Tallahassee, F     |  |  |
|  | Tallahassee, FL                   |                            |                          |                          | rananassee, r                       | L 32314  |  |
| Enclos                                     | ed is a check for                 | the following ar           | mount:                   |                          |                                     |  |  |
| ☐ \$70                                     | 0.00 Filing Fee                   | \$78.75 Fil<br>Certificate | ing Fee &<br>e of Status |                          | Filing Fee & ed Copy                | ☐ \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |  |



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2013

ANTHONY BRUNSON 2001 DR. MLK JR. ST. N #2 ST PETERSBURG, FL 33704

SUBJECT: TONY BRUNSON, INC. Ref. Number: W13000053105

We have received your document for TONY BRUNSON, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II

Letter Number: 013A00022432

www.sunbiz.org

Division of Comparations D.O. DOV 6297 Tollahagas Florida 2991

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

O4/25/2007

(Date of incorporation)

(Date of incorporation)

3. 20-89/64/9

(FEI number, if applicable)

Perpetual

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2001 Dr MLH Jr St N #2: St Petersburg FL 33704

(Principal office address)

2001 Dr MLH Jr St N #2 St Petersburg FL 33704

(Current mailing address) Porit
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) Anthory Brunson

2001 Dr. MLH Jr St N #2

St Petersburg, Florida 3370

(City) (7in code) Name: Office Address: 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.

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 FILED Chairman: SECRETARY OF STATE TALLAHASSEE FLORIDA Vice Chairman: \_ Address: Director: Address: \_\_ Director: \_ Address: **B. OFFICERS** President: \_\_\_ Address: \_\_\_ Vice President: Address: \_ Secretary: \_\_ Address: Address: 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. Anthony 7,

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

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



# Office of the Secretary of State

John Steen Secretary of State

FILED

13 OCT -4 PM 1: 32

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for TONY BRUNSON, INC. (file number 800806466), a Domestic For-Profit Corporation, was filed in this office on April 25, 2007.

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

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 October 03, 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

TID: 10264

Dial: 7-1-1 for Relay Services Document: 507402770003