

F130000004621

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

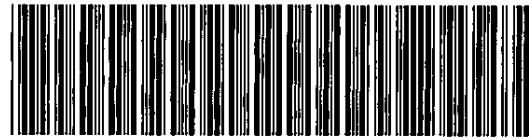
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MRD
10/25/13

1612 F255K

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: JELCO G.V., 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:

James C. Evans

Name of Person

Jelco G.V., Inc.

Firm/Company

P.O. Box 112575

Address

Naples, Florida 34108

City/State and Zip code

jevans@ecomsystems.com

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

For further information concerning this matter, please call:

James Evans

Name of Person

at (239) 825-7462

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:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|--|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2013

JAMES C EVANS
JELCO G.V., INC.
PO BOX 112575
NAPLES, FL 34108

SUBJECT: JELCO G.V., INC.
Ref. Number: W13000057554

RECEIVED
13 OCT 24 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for JELCO G.V., INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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

Ruby Dunlap
Regulatory Specialist II

Letter Number: 313A00024241

PLEASE NOTE: You have included an alternate name in your document that is not allowed under corporate law. If you want to do business in Florida under a different name other than the one you incorporated under, you will need to file a fictitious name application. You can find this form on our website at www.sunbiz.org.

**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. Jelco G.V., Inc.

(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)

2. Nevada

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

3. 31-1762845

(FEI number, if applicable)

4. 4/3/2001

(Date of incorporation)

5. PERPETUAL

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

6. _____
(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2675 HORSESHOE DR. S. SUITE 400 NAPLES, FL. 34104

(Principal office address)

P.O. BOX 112575 NAPLES, FL. 34108

(Current mailing address)

8. MAINTAIN OFFICE

(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:

JAMES C. EVANS

Office Address:

2675 HORSESHOE DR. S. SUITE 404

NAPLES

(City)

, Florida

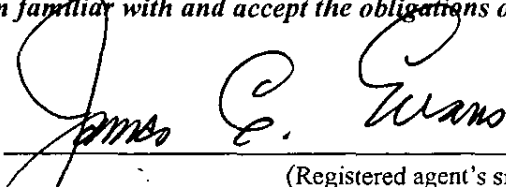
34104

(Zip code)

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TALLAHASSEE, FLORIDA

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.

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

A. DIRECTORS

Chairman: W.P. JOHNSON
Address: 102 WEST LINCOLN AVE.
GOSHEN, INDIANA 46527

Vice Chairman: N.A.

Address: _____

Director: JAMES C.EVANS

Address: P.O.BOX 112575
NAPLES, FLORIDA 34108

Director: _____

Address: _____

B. OFFICERS

President: JAMES C.EVANS

Address: P.O. BOX 112575
NAPLES, FLORIDA 34108

Vice President: _____

Address: _____

Secretary: JAMES C.EVANS

Address: P.O. BOX 112575 NAPLES, FL. 34108

Treasurer: W.P. JOHNSON

Address: 102 WEST LINCOLN AVE. GOSHEN, INDIANA 46527

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. James C. Evans, PRESIDENT

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. JAMES C.EVANS, PRESIDENT

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

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13 OCT 24 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **JELCO G.V., INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 3, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 17, 2013.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20130917-1936
You may verify this electronic certificate
online at <http://www.nvsos.gov/>