

F14000001742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

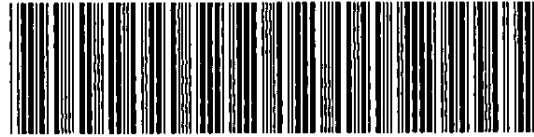
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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 4/21/14

NAME: TUCKER SAFETY PRODUCTS, INC

TYPE OF FILING: APPLICATION

COST: 87.50

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TUCKER SAFETY PRODUCTS, 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:

Capitol Services Corporate Filings Team

Name of Person

Capitol Services, Inc.

Firm/Company

800 Brazos, Suite 400

Address

Austin, TX 78701

City/State and Zip code

kathy@burnguard.com

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

For further information concerning this matter, please call:

Teresa Morales

Name of Person

at (800) 345-4647

Area Code & Daytime Telephone Number

IMPORTANT: The email address entered here will be utilized for future ANNUAL REPORT NOTIFICATIONS!!

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

**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. TUCKER SAFETY PRODUCTS, 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. Colorado

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

3. 95-4062015

(FBI number, if applicable)

4. 01/19/1999

(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. 2835 Janitell Road, Colorado Springs, CO 80906

(Principal office address)

2835 Janitell Road, Colorado Springs, CO 80906

(Current mailing address)

8. developing, manufacturing, marketing and selling personal protective apparel

(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: Capitol Corporate Services, Inc.

Office Address: 155 Office Plaza Dr Ste A

Tallahassee

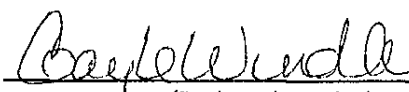
(City)

, Florida 32301

(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)

Gayle Windle, Assistant Secretary on behalf
of Capitol Corporate Services, Inc.

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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CLERK OF COURT
DIVISION OF CORPORATIONS
2014 APR 17 AM 8:11

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2014 APR 17 AM 8:11

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Vincent Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

Director: Kathryn Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

B. OFFICERS

President: Vincent Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

Vice President: Kathryn Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

Secretary: Kathryn Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

Treasurer: Kathryn Tucker

Address: 2835 Janitell Road, Colorado Springs, CO 80906

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. Kathryn Tucker, Secretary/Treasurer

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

2014 APR 17 AM 8:11

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

TUCKER SAFETY PRODUCTS, INC.

is a **Corporation** formed or registered on 01/19/1999 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19991009885.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/15/2014 that have been posted, and by documents delivered to this office electronically through 04/17/2014 @ 13:34:21.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 04/17/2014 @ 13:34:21 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8825307.



Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."