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(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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Office Use Only

MD11/13

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Red Auto Administration, 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:
Elijah Worton Name of Person
Name of Person
Red Auto Administration, Inc
Firm/Company
5350 Collage Blud Address
Overland Park, K5 66211 City/State and Zip code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (8/6) 3/5-8475 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	213 C	7
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBREGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA		ON S
1. Red Auto Administration, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	7) 2 7) 2 7) 2 7) 7	0.1
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	1080J	PH 3: 22
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busing		-
2. <u>Kansus</u> 3. 46-504805		
2. Kansas 3. 46-504805 (State or country under the law of which it is incorporated) (FEI number, if applicable)	e)	
4 3/9/2014 5. Per Detus!		
4. 3/9/2014 5. Per Astron. (Duration: Year corp. will cease to exist of the corp.)	or "perpetua	l''')
6.		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. 5350 College Blyd Overland Park, K5 6 (Principal office address)	6211	
(Principal office address)		
5ame		
(Current mailing address)		
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
Name: <u>Incorp</u> Services, Inc.		
Office Address: 17888 67 d Court North		
Loxahatchee , Florida 33470 (City) (Zip code)		
(City) (Zip code)		
9 Registered agent's accentance		

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.

My Nortaine Bales on behalf of Incorp services, Inc.
(Registered agent's signature)

10. 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.

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

A. DIRECTORS	
Chairman: Elijah Norton	
Address: 4741 Central Center Un	17405
Kansas City, mo 64112	
Vice Chairman:	
Address:	
Director:	
	4 0
Address:	
	55 N
Director:	
Address:	
B. OFFICERS	
President: Elijah Norton	
Address: 4741 Central Center U.	nit 405
Kansas City, Mo64112	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
\cap \setminus \setminus \setminus	
NOTE: If necessary, you may attach an addendum to the application li	sting additional officers and/or directors.
12. Signature of Director or Off	icer
The officer of director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a	per 12 above) affirms that the facts stated herein
a third degree felony as provided for in s.817.155, F.S.	accument to the Department of State constitutes
13. Elijah Norton CFO/Pr (Typed or printed name and capacity of person	esident
(Typed or printed name and capacity of person	signing application)

STATE OF KANSAS OFFICE OF SECRETARY OF STATE

I, Kris W. Kobach, Kansas Secretary of State, certify that the records of this office reveal the following:

Business Entity ID Number: 7702368

Entity Name: RED AUTO ADMINISTRATION, INC

Entity Type: KANSAS FOR PROFIT CORPORATION

State of Organization: KANSAS

Resident Agent: ROBERT G NORFLEET

Registered Office: 5350 College Blvd, OVERLAND PARK, KS, 66211

was filed in this office March 9, 2014,

and is in good standing,

having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

OF LAND

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 31, 2014.

KRIS W. KOBACH

KANSAS SECRETARY OF STATE