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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

14 DEC -4 ANTI: 18

SECRETARY OF STATE
TALL THASSES FLORIDA

November 25, 2014

DAVID CARLISLE COMTALK, INC. P.O. BOX 487 SATSUMA, AL 36572

SUBJECT: COMTALK, INC. Ref. Number: W14000070844

We have received your document for COMTALK, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must contain both the street address of the principal office and the mailing address of the entity.

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

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 214A00025056

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Comtalk, Inc.			
	of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to t	e of Good Star	ding" and check are sub	
Please return all correspondence concern	ing this matter	to the following:	
David Carlisle			
	Name of	Person	
Comtalk, Inc.			
	Firm/Com	pany	
P. O. Box 487			
Satsuma, AL 36572	Addre	ess	
· · · · · · · · · · · · · · · · · · ·	City/State a	nd Zip code	
dcarlisle@comtalkinc.com			
E-mail address	s: (to be used t	or future annual report r	notification)
For further information concerning this n	natter, please o	all:	
David Carlisle	251	, 675-1365	
Name of Person	Area (_) 675-1365 Code & Daytime Telepho	one 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 amo	ount:		
■ \$70.00 Filing Fee ■ \$78.75 Filin Certificate of		\$78.75 Filing Fee & Certified Copy	S87.50 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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,	
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting	g business in Florida)
State of A	Alabama	72-1346032	
(State or countr	y under the law of which it is incorporated)	(FEI number, if app	licable)
January:	2, 1997 ₅	perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
	(Date first transacted business in		
P . O. Box P. O. Box	(SEE SECTIONS 607.1501 & 607.15 487 Satsuma, AL 36572 (Principal office address) 487 Satsuma, AL 36572	02, F.S., to determine penalty liability 5805 Hwy.	43 Safsun
P . O. Box P. O. Box	(SEE SECTIONS 607.1501 & 607.15 487 Satsuma, AL 36572 (Principal office address)	02, F.S., to determine penalty liability 5805 Hwy.	
	(SEE SECTIONS 607.1501 & 607.15 487 Satsuma, AL 36572 (Principal office address) 487 Satsuma, AL 36572	02, F.S., to determine penalty liability 5805 Hwy.	H3 Sorfsum
Name and street	(SEE SECTIONS 607.1501 & 607.15 487 Satsuma, AL 36572 (Principal office addressed Albard Satsuma, AL 36572 (Current mailing addressed addressed agent: (P.O.)	02, F.S., to determine penalty liability 5805 Hwy.	H3 Safsum
Name and stree	(SEE SECTIONS 607.1501 & 607.15 487 Satsuma, AL 36572 (Principal office address of Florida registered agent: (P.O.) Mark Hladik	02, F.S., to determine penalty liability 5805 Hwy.	H3 Safsun

9. 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)

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:	· · · · · · · · · · · · · · · · · · ·
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	<u> </u>
	25 D T
B. OFFICERS	
President: David Carlisle	
Address: P. O. Box 487	# 2 2 2 2
Satsuma, AL 36572	3,000 time
Vice President:	
Address:	· · · · · · · · · · · · · · · · · · ·
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application lis	ting additional officers and/or directors.
12.	
Signature of Director or Office The officer or director signing this document (and who is listed in number 1).	er 12 above 73 frm/ that the facts stated herein
are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, F.S.	document to the Department of State constitutes
David Carlisle President/Owner	141/1
(Typed or printed name and capacity of person	igning application)
•	ν

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

State of Alabama

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that COMTALK, Inc. was formed in Mobile County, Alabama on January 2, 1997. The Alabama Entity Identification number for this entity is 184-346. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20141105000018024

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

11/5/2014

Date

di sum

Jim Bennett

Secretary of State