F15000001207

(Request	or's Name)	
(Address)	
(Address)	
(City/Stat	e/Zip/Phone #))
PICK-UP	WAIT	MAIL
(Busines:	s Entity Name)	
(Docume	nt Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing	Officer:	
W15-932	20 —	

Office Use Only



000268972640

02/03/15--01006--013 **70.00

SECRETARY OF STATE



144

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Walker Product.s	s. Inc.		
50 5 0E01		- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to tran	f Good Star	nding" and check are sub-	
Please return all correspondence concerning	g this matter	to the following:	
Timothy Alan Weaver			
	Name of	Person	
Walker Products, Inc.			
	Firm/Com	pany	
525 West Congress Stree	∍t ————		
Pacific, Missouri 63069	Addre	ess	
	City/State a	nd Zip code	
tweaver@walkerproducts.co			
E-mail address: (For further information concerning this mat	•	for future annual report n	otification)
Timothy A Weaver	636	257-2400	
Name of Person	Area	Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, F	ction orporations
Enclosed is a check for the following amou	nt:		
■ \$70.00 Filing Fee □ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2015

TIMOTHY ALAN WEAVER 525 WEST CONGRESS STREET PACIFIC, MO 63069

SUBJECT: WALKER PRODUCTS, INC.

Ref. Number: W15000009320

We have received your document for WALKER PRODUCTS, 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 document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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 further questions concerning your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 915A00002647

www.sunbiz.org

Division of Communities D.O. DOV 0007 Well-bases Florida 2001

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.

	rporation; must include "INCORPORATED, rp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
(If name unavailal	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
2. California	3	95-1608978		
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
_{4.} 6-21-49	5.	Perpetual		
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6.				
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
525 West (Congress Street, Pacific,	, 10 -		
7. 020 West	(Principal office add			
525 West 0	Congress Street, Pacific, Mi	ודי מי		
amaraga — kija Jawa kacama	(Current mailing add	ress) PAT RESIDENCE OF THE PATRICULAR PROPERTY O		
Name and street	address of Florida registered agent: (P.C	D. Box: NOT acceptable)		
Name:	Victoria Philpotts			
Office Address:	1507 17th Street East			
	Palmetto	Florida 34421		
	(City)	, Florida 34421 (Zip code)		
designated in this d further agree to co	d as registered agent and to accept servi application, I hereby accept the appoints	Philpsla		

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.

APPROVEL FLED

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

man: Michael Weaver	15 MAR 23	AM 8:
14291 Commerce Drive, Garden Grove, California 92843	SECRETARY TALLAHASSEE	OF STAT
Chairman:		
ess:		
or:		
55:		
or:		
s:		
FFICERS ont: Michael Weaver 14291 Commerce Drive, Garden Grove, California 92843		
resident: Grant Kitching		
s: 14291 Commerce Drive, Garden Grove, California 92843		
Timothy Weaver		
525 West Congress Street, Pacific, Missouri 63069		
_{rer:} Jeffrey Weaver		
525 West Congress Street, Pacific, Missouri 63069		
E: If necessary, you may attach an addendum to the application listing additional officers an	d/or directors.	
Signature of Director or Officer		
Signature of Director of Officer ficer or director signing this document (and who is listed in number 12 above) affirms that the and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.		
imothy Weaver, Secretary Jimetry A. Meaner (SECRETA	(Ry)	
(Typed or printed name and capacity of person signing application)	()	

State of California

Secretary of State

AND FILED

15 MAR 23 AM 8:56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF STATUS

ENTITY NAME:

WALKER PRODUCTS

FILE NUMBER:

C0238533

FORMATION DATE:

08/24/1949

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

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



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 20, 2015.

ALEX PADILLA Secretary of State