Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

Kruse & Associates, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: New Filling Section Division of Corpo			
SUBJECT: Kruse & As	sociates, Inc.		: }
	Name of corporat	tion - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,"		for Authorization to Trans: Standing" and check are su siness in Florida.	
Please return all correspon	ndence concerning this ma	atter to the following:	:
Jay Schroeder			·
	Name	of Person	:
CT/NRAI Houston			
	Firm/C	Company	
1021 Main Street, Suite 115	0		
-	Ac	dress	<u> </u>
Houston, TX 77002			,
	City/Stat	e and Zip code	?
sglanz@kruscassoc.com			
	E-mail address: (to be us	ed for future annual report	notification)
For further information eq	oncerning this matter, plea	se call:	
Joy Schroeder	ut (⁷¹³	332-3793 ea Code & Daytime Telepi	
Name of Person	Ar	ea Code & Daytime Telepi	none Number
			<u>;</u>
STREET/COUR New Filing Section Division of Corporation Building 2661 Executive Contains and Contains and Court of Court	on orations enter Circle	MAILING A New Filing S Division of C P.O. Box 632 Tallahassee, I	ection Orporations 7
Enclosed is a check for the	e following amount:		ţ
■ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☐ \$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.

or "Corp.") ter alternate corporate name	adopted for the purpose of transacting business in Florida) 73-1444019 (FEI number, if applicable) Perpetual (Duration: Year corp. will cease to exist or "perpetual")	-
3. (which it is incorporated)	73-1444019 (FEI number, if applicable) Perpetual	-
3. (which it is incorporated)	73-1444019 (FEI number, if applicable) Perpetual	-
5.	(FEI number, if applicable) Perpetual	-
5.	Perpetual	-
5.		
	(Duration: Year corp. will cease to exist or "perpetual")	
·		-
	į	
te first transacted business j CTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty tiability)	-
, OK 74133		
(Principal office add	ress)	-
	•	
(Current mailing add	ress)	
-	D. Box NOT acceptable)	E 8
IRAI Services, Inc.		
South Pine Island Road	: 	
Plantation	, Florida 33324	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
(City)	(Zip code)	
agent and to accept servi ereby accept the appoints rovisions of all statutes r I accept the obligations of	ment as registered agent and agree to act in this cap relative to the proper and complete performance of t	acity. I
	(Current mailing add rida registered agent: (P.ANRAI Services, Inc. South Pine Island Road Plantation (City) Element and to accept services agent and to accept the appointmentations of all statutes and accept the obligations of	(Current mailing address) (Current mailing address) rida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. South Pine Island Road Plantation , Florida 33324 (City) (Zip code) c: agent and to accept service of process for the above stated corporation at the ereby accept the appointment as registered agent and agree to act in this cape provisions of all statutes relative to the proper and complete performance of a decept the obligations of my position as registered agent. Joy Schroeder

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.

FL019 - 05/17/2014 Waters Kinger Onless

11. Names and business addresses of officers and/or directors:	· ·		
A. DIRECTORS	•		
Chairman:			
Address:			
Vice Chairman:			
Address:			
			
Director:	<u> </u>		
Address:	<u> </u>		
		_	
Director:		_	
Address:	<u> </u>	_	
	·	_	
B. OFFICERS		15	
President: Chris Walton	24	HAR	
Address: 8596 E. 101st Street, Suite H. Tulsa, OK 74133		26	•
	1975 - 1975 1975 - 1975	-R (
Vice President:	ं हिंग	_ ``	
Address:			
		_	
Secretary: Brad Kruse		_	
Address: 8596 E. 101st Street, Suite H, Tulsa, OK 74133	i	_	
Treasurer:	 	_	
Address:		_	
NOTE: If necessary ou may attach an addendum to the application listing additional	officers and/or directors.		
12. Signature of Director or Officer		_	
The officer or director signing this document (and who is listed in number 12 above) affi are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.		;	
13. Chris Walton, President	<u> </u>		
(Typed or printed name and capacity of person signing applicat	ion)	_	

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OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that KRUSE & ASSOCIATES, INC. whose registered agent is ROBERT D. KRUSE, with its registered office at 2224 WEST MEMPHIS PLACE BROKEN ARROW 7-1012 USA Oklahoma is a Domestic For Profit Business Corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>5th</u>, day of <u>March</u>. 2015.

Secretary Of State

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