F16000002369

(Re	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





400285112244

05/24/16--01011--024 **800.00

05/11/16--01016--012 **78.75



MAY 25 2016 J SHIVERS





May 12, 2016

KARLI HAPE 4609 E BOONVILLE NEW HARMONY RD EVANSVILLE, IN 47725

SUBJECT: WESTERN EXCELSIOR CORPORATION

Ref. Number: W16000035081

We have received your document for WESTERN EXCELSIOR CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

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) 245-6051.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 316A00010069

COVER LETTER

TO: Registration Section						
Division of Corporations Western Excelsior Corporation						
SUBJECT:						
	Name of corporation	on - must include suffix				
Dear Sir or Madam:						
The enclosed "Application I "Certificate of Existence," of above referenced foreign co	r "Certificate of Good Sta	anding" and check are s				
Please return all correspond Karli Hape	ence concerning this matt	er to the following:				
	Name o	f Person	· <u>- · · · · · · · · · · · · · · · · · ·</u>			
Western Excelsior Corporation						
	Firm/Co	mpany				
4609 E Boonville New Harmo	ny Rd	•				
	Add	ress	· · · · · · · · · · · · · · · · · · ·			
Evansville, IN 47725	7100					
	City/State	and Zip code	<u></u> ,			
khape@westernexcelsior.com	·	•				
F	-mail address: (to be used	l for future annual repor	t notification)			
For further information con-	erning this matter, please	call:				
Karli Hape		867-4878				
Name of Person	at (at Co		ephone Number			
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 32	tions ter Circle	Registration	Corporations 27			
Enclosed is a check for the	ollowing 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.

Western Excelsi	<u> </u>		
	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION	, "
(If name unavaila Colorado 2.		5-0226591	
(State or countr 03/31/1973	y under the law of which it is incorporated) 5.	(FEI number, if ap	plicable)
·	of incorporation)	(Date of duration, if other than perpetual)	
-	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 New Harmony Rd; Evansville, IN 47725		ity)
Same	(Principal	office address)	
	(Current mailing	address, if different)	
8. Name and stree	et address of Florida registered agent: (P.O. CT Corporation System	Box NOT acceptable)	7 M. W.
Name:	1200 South Pine Island Road		SE 2
Office Address:		33324	3 7
	Plantation	, Florida	7:5% WARD
	(City)	(Zip code)	

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.

Jenifer Vincent Jenifer Vincent, VP and Asst. Sec.

(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 Norman Snyder	
Chairman: 4609 E Boonville New Harmony Rd	
Address:Evansville, IN 47725	
Zachary Snyder Vice Chairman:	
4609 E Boonville New Harmony Rd Address:	
Evansville, IN 47725	
Joseph Snyder Director:	
4609 E Boonville New Harmony Rd Address:	
Evansville, IN 47725	
Director:	
Address:	
B. OFFICERS	50 50 50 50 50 50 50 50 50 50 50 50 50 5
Zachary Snyder President:	
4609 E Boonville New Harmony Rd Address:	
Evansville, IN 47725	7
Joseph Snyder Vice President:	3 5
4609 E Boonville New Harmony Rd	
Address: Evansville, IN 47725	
Norman Snyder	
Secretary:4609 E Boonville New Harmony Rd, Evansville, IN 47725	
Address: Norman Snyder	
Treasurer:	
NOTE: If necessary, you may attach an addendum to the application listing addition	nal officers and/or directors.
12. 2	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) are true and that he or she is aware that false information submitted in a document to a third degree felony as provided for in s.817.155, F.S.	the Department of State constitutes
13. ZACHARY SNYDER, PRESID	
(Typed or printed name and capacity of person signing appli	cation)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

WESTERN EXCELSIOR CORPORATION

is a

Corporation

formed or registered on 10/30/1989 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 19891103590.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/05/2016 that have been posted, and by documents delivered to this office electronically through 05/10/2016 @ 08:03:52.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 05/10/2016 @ 08:03:52 in accordance with applicable law. This certificate is assigned Confirmation Number 9642127



Mayra N. Williams

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 Validate a Certificate 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 "Businesses, trademarks, trade names" and select "Frequently Asked Questions."