

FI6000003455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

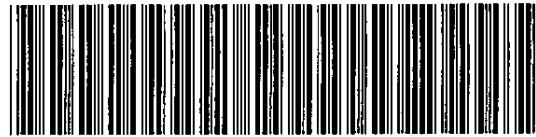
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/26/16--01028--008 **70.00

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16 AUG -3 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 04 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

Attn: Jenna

SUBJECT: WKTR 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:

Victor Sochocki

Name of Person

WKTR Inc.

Firm/Company

1725 Harbor Oaks Pl.

Address

Merritt Island, FL, 32952

City/State and Zip code

VJ@Ascendants.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Sochocki

at (**407**) **463-3336**

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following 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

Already paid -

- see Document # W16000052332

- we are re-submitting our application with corrected information.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2016

VICTOR SOCHOCKI
1925 HARBOR OAKS PL
MERRITT ISLAND, FL 32952

SUBJECT: WKTR INC.
Ref. Number: W16000052332

We have received your document for WKTR 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 entity's date of incorporation/organization must be listed in the document.

Please return 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 516A00015788

FILED
16 AUG -3 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.*

WKTR Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. **Indiana** 3. **74-3216404**
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. **11/19/2004** 5. **Perpetual**
(Date of incorporation) (Date of duration, if other than perpetual)
6. **08/1/2016**
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. **1725 Harbor Oaks Pl., Merritt Island, FL, 32952**
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

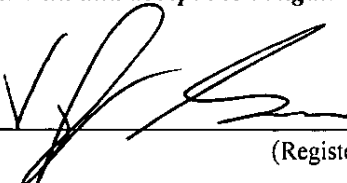
Name: **V.J. Sochocki**

Office Address: **1725 Harbor Oaks Pl.**
Merritt Island, Florida **32952**
(City) (Zip code)

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16 AUG -3 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: _____

B. OFFICERS

President: Victor Sochocki

Address: 1725 Harbor Oaks Pl.

Merritt Island, FL 32952

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you 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 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Victor Sochocki

(Typed or printed name and capacity of person signing application)

FILED
16 AUG -3 AM 8 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**State of Indiana
Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

WKTR INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on November 19, 2004, and was in existence or authorized to transact business in the State of Indiana on July 20, 2016.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 20, 2016

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

2004112200278 / 201663371

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>