# FIMMO5125

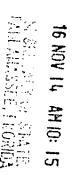
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2016

DARIAN DANNER 3201 C STREET, SUITE 801 ANCHORAGE, AK 99503

SUBJECT: UKPEAGVIK INUPIAT CORPORATION

Ref. Number: W16000070961



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

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.

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.

Tanisha L Washington Regulatory Specialist II

Letter Number: 916A00022402

#### **COVER LETTER**

	tration Section						
SUBJECT:	_	INUPIAT COR	PORATION				
Name of corporation - must include suffix							
Dear Sir or M	adam:						
"Certificate of	f Existence," (		of Good Stand	ling" and check a		siness in Florida," ad to register the	
Please return a	-	lence concernin	g this matter	to the following:			
•			Name of P	erson			
UKPEAGVIK	INUPIAT COI	RPORATION					
3201 C STREE	T, SUITE 801		Firm/Comp	oany			
			Addre	SS			
ANCHORAGE	E, ALASKA 99 	503 					
DARIAN.DAN	NER@UICAI	ASKA.COM	City/State an	d Zip code			
		-mail address:	(to be used for	or future annual re	eport notifi	cation)	
For further int	formation con	cerning this ma	tter, please ca	ıll:			
DARIAN DANNER		a	907 at (	982-4232	2-4232		
Name of Person			Area Code	Daytime	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:			Registra Division P.O. Box	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
\$70.00 File		\$78.75 Filing Certificate of	Fee &	\$78.75 Filing Fe Certified Copy	e& 🗇	\$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. UKPEAGVIK INUPLAT CORPORATION (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) 92-0044212 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) 10/15/2016 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3201 C STREET, SUITE 801 ANCHORAGE, ALASKA 99503 (Principal office address) 3201 C STREET, SUITE 801 ANCHORAGE, ALASKA 99503 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CORPORATION SERVICE COMPANY Name: 1201 HAYS STREET Office Address: TALLAHASSEE (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.

By Corporation Service Company
Confred Ully Asist. Socretary
(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. DIRI	ECTORS PRICE E. BROWER						
Chairman	; <u></u>						
Address:	PO BOX 890						
	BARROW, ALASKA 99723						
Vice Chai	NED T. AREY, SR.						
Address:	PO BOX 890						
	BARROW, ALASKA 99723						
Director:	BEVERLY J. SHONTZ ELIASON	<del></del>					
Address:	3201 C STREET, SUITE 801						
	ANCHORAGE, ALASKA 99503						
Director:	LLOYD KANAYURAK	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
Address:	PO BOX 890	<i>3</i> € <b>3</b> 6					
	BARROW, ALASKA 99723	20 N					
B. OFFI	CERS						
President:	ANTHONY E. EDWARDSEN						
	3201 C STREET, SUITE 801						
	ANCHORAGE, ALASKA 99503						
DAVID MAASAK LEAVITT, JR.  Vice President:							
	PO BOX 890						
	BARROW, ALASKA 99723						
Secretary:	RICHARD UNGAROOK, SR.						
-	PO BOX 890 BARROW, ALASKA 99723						
Treasurer:	GERALD REXFORD						
Address:	PO BOX 890 BARROW, ALASKA 99723						
NOTE: I	f necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.					
12.							
	Signature of Director or Officer						
are true an	er or director signing this document (and who is listed in number 11 above) affirm and that he or she is aware that false information submitted in a document to the D gree felony as provided for in s.817.155, F.S.						
13.	ANTHONY E. EDWARDSEN, PRESIDENT & CEO						
	(Typed or printed name and capacity of person signing application	n)					

Alaska Entity #11815D

## State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

## **Certificate of Compliance**

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

#### Ukpeagvik Inupiat Corporation

This entity was formed on April 19, 1973 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.

Oh Halix



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **November 04, 2016**.

Chris Hladick Commissioner 16 NOV 14 AM ID: 15

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