

F 17000000612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

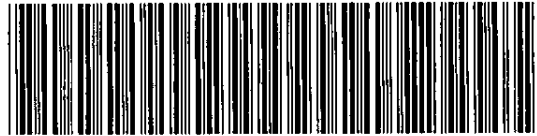
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 FEB -8 AM 7:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4055



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 31, 2017

PATRICK DOMINICK
2921 DAYTON DR
WINTER HAVEN, FL 33884

SUBJECT: GEONET SERVICES, INC
Ref. Number: W17000008697

RECEIVED
2017 FEB - 8 PM 3:19
TALLAHASSEE, FL 32314

We have received your document for GEONET SERVICES, 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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 II Supervisor
Registration/Qualification Section

Letter Number: 017A00001895

**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.*

1. GEONET SERVICES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

GEONET SERVICES FL, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ALABAMA

(State or country under the law of which it is incorporated)

3. 63-1152220

(FEI number, if applicable)

4. 08/21/1995

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. 1/1/2017

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2921 DAYTON DRIVE WINTER HAVEN FL 33884

(Principal office address)

(Current mailing address, if different)

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

Name: PATRICK DOMINICK

Office Address: 2921 DAYTON DRIVE

WINTER HAVEN

(City)

, Florida 33884

(Zip code)

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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.

Patrick Dominick

(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: PATRICK R DOMINICK

Address: 2921 DAYTON DRIVE

WINTER HAVEN FL 33884

Vice Chairman: SAME

Address: _____

Director: SAME

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SAME

Address: _____

Vice President: SAME

Address: _____

Secretary: SAME

Address: _____

Treasurer: SAME

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Patrick R. Dominick

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. PATRICK R DOMINICK PRESIDENT/DIRECTOR

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that GeoNet Services, Inc. was formed in Mobile County, Alabama on August 21, 1995. The Alabama Entity Identification number for this entity is 173-983. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20170119000024272

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

1/19/2017

Date

J. H. Merrill

John H. Merrill

Secretary of State