

F17000002457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

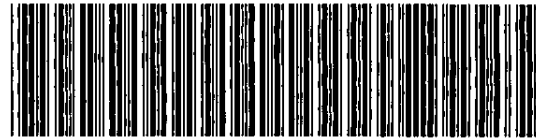
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2017 MAY 26 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUN 01 2017  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Luke Oil Co., 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:

Jonathan Carlson

Name of Person

Luke Oil Co., Inc.

Firm/Company

3592 N Hobart Rd

Address

Hobart, IN 46342

City/State and Zip code

jcarlson@lukeoil.com

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

For further information concerning this matter, please call:

Jonathan Carlson

Name of Person

at

(219)

Area Code

962-7676 ext 1155

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 17, 2017

JONATHAN CHARLSON  
3592 N HOBART RD  
HOBART, IN 46342

SUBJECT: LUKE OIL CO, INC.  
Ref. Number: W17000042019

FILED  
2017 MAY 26 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

We have received your document for LUKE OIL CO, 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 registered agent must sign accepting the designation.

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: 417A00009868

CEIV  
2017 MAY 26 AM 10:42  
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.*

1. Luke Oil Co., Inc.  
(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. 35-1329072  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/01/1974 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 3592 N Hobart Rd, Hobart, IN 46342-1442  
(Principal office address)

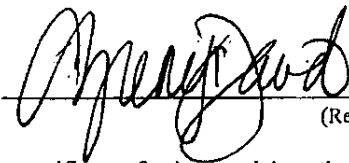
Same  
(Current mailing address, if different)

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

Name: Registered Agent Solutions, Inc.  
Office Address: 155 Office Plaza Dr., Suite A  
Tallahassee, Florida 32301  
(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.*



**Brenda L. David**  
**Assistant Secretary**

(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.

**FILED**  
2017 MAY 26 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Thomas M Collins  
Address: 2404 Williams Ct.  
Valparaiso, IN 46385

Vice Chairman: Thomas M Collins II  
Address: 3311 Red Summer Sun Ct.  
Valparaiso, IN 46385

Director: N/A  
Address: —

Director: N/A  
Address: —

**B. OFFICERS**

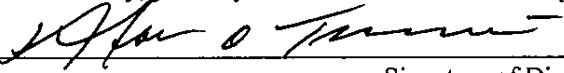
President: Thomas M Collins  
Address: 2404 Williams Ct.  
Valparaiso, IN 46385

Vice President: Thomas M Collins II  
Address: 3311 Red Summer Sun Ct.  
Valparaiso, IN 46385

Secretary: Mark O Tarnowski  
Address: 30 Covington Dr. Valparaiso, IN 46385

Treasurer: N/A  
Address: N/A

**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. Mark O Tarnowski  
(Typed or printed name and capacity of person signing application)

FILED  
2017 MAY 26 PM 1:01  
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

**LUKE OIL CO., INC.**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on November 01, 1974, and was in existence or authorized to transact business in the State of Indiana on April 04, 2017.

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, April 04, 2017

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

197411-012 / 2017269570

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