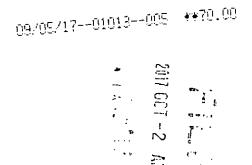
# F170000004450

| (Re                     | questor's Name)   |                    |  |  |
|-------------------------|-------------------|--------------------|--|--|
| (Ad                     | dress)            |                    |  |  |
| (Ad                     | dress)            | <del></del>        |  |  |
| (Cit                    | y/State/Zip/Phone | <del>&gt;</del> #) |  |  |
| PICK-UP                 | MAIT              | MAIL               |  |  |
| (Bu                     | siness Entity Nan | ne)                |  |  |
| (Document Number)       |                   |                    |  |  |
| Certified Copies        | _ Certificates    | s of Status        |  |  |
| Special Instructions to | Filing Officer:   |                    |  |  |
|                         |                   |                    |  |  |
|                         |                   | ;                  |  |  |
|                         |                   |                    |  |  |

Office Use Only



900302873059



OCT O. 2 2017 J. HARRIS

#### COVER LETTER

| TO: Registration Section Division of Corporations   |  |
|---|--|
| Big Trak Technologies, Inc.   |  |
| SUBJECT:  | ration - must include suffix   |
| Name of corpor  | ation - must include surrix  |
| Dear Sir or Madam:  |  |
| The enclosed "Application by Foreign Corporatio "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by | n for Authorization to Transact Business in Florida," I Standing" and check are submitted to register the ousiness in Florida. |
| Please return all correspondence concerning this r<br>Robert E. Turffs  | natter to the following:   |
| Nan   | ne of Person   |
| Robert E. Turffs, P.A.  |  |
| Firm  | /Company   |
| 1444 First Street, Suite B  |  |
|   | Address  |
| Sarasota, FL 34236  |  |
| City/S  | tate and Zip code  |
| turffs.filing@gmail.com; turffs@gmail.com   |  |
| E-mail address: (to be  | used for future annual report notification)  |
| For further information concerning this matter, pl  | ease cull:   |
| Robert E. Turffs 941 at (   |  |
|   | a 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                                       |  |



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 6, 2017

ROBERT E TURFFS ROBERT E TURFFS, PA 1444 FIRST STREET, SUITE B SARASOTA, FL 34236

SUBJECT: BIG TRAK TECHNOLOGIES, INC.

Ref. Number: W17000072942

We have received your document for BIG TRAK TECHNOLOGIES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 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: 817A00018442

2017 OCT - 2 PE 12: 1

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| Big Trak Techn   | · ·  |                                     |   | <del></del>                            |                  |
|--|--|-------------------------------------|---|--|------------------|
| Enter name of c  | corporation; must include "INCORP<br>"orp," "Inc," "Co," or "Corp.")   | ORATED," ("C                        | OMPANY," "CORPORATION."   |  |                  |
| If name unavail  | able in Florida, enter alternate corpo   | orate name adop                     | sted for the purpose of transacting business  | s in Florida)                          |                  |
| South Carolina   |  | 3.                                  |   |  |                  |
| (State or count  | ry under the law of which it is incon  |                                     | (FEI number, if applicable)   |  |                  |
|  | 4-9-2007   | 5                                   |   |  |                  |
| (Date  | e of incorporation)  |                                     | (Date of duration, if other than perp   | etual)                                 |                  |
|  | (Date first transacted<br>(SEE SECTIONS 607.150  | 1 business in Flo<br>01 & 607.1502, | orida, if prior to registration) F.S., to determine penalty liability)  |  |                  |
| 421  | DAK BrOOK Pr   | eo/u                                | mbia , 5 c · 29223  |  |                  |
|  |  | (0.1                                | 43 11   | <b></b> ;                              | N 3              |
|  |  | (Principallo                        | ffice address)  |  | C                |
|  |  |                                     |   | <u></u>                                | 7817 GC          |
|  |  |                                     | ldress, if different)   | <u>→</u> ·                             | - 130 /19        |
|  | (Cu  | urrent mailing a                    | ldress, if different)   |  | ### CCT -2       |
| Name and stre  |  | urrent mailing a                    | ldress, if different)   |  | 001 0CT -2 AET   |
|  | (Cu<br>et address of Florida registered :  | urrent mailing a                    | ldress, if different)   |  | BH GCT -2 AHH:   |
| Name and stre  | (Cu<br>tet address of Florida registered a<br>Robert E. Turffs, P.A.   | urrent mailing a                    | ldress, if different)   | ************************************** | 011 0CT -2       |
| Name and <u>stre</u><br>Name:  | (Cu<br>tet address of Florida registered a<br>Robert E. Turffs, P.A.<br>1444 First Street, Suite B   | urrent mailing a                    | ldress, if different)  ox NOT acceptable)   | ************************************** | 001 GCT -2 /AHH: |
| Name and stre  Name: ice Address:  Registered agving been naning the street to the str | (City)  gent's acceptance:  ned as registered agent and to a second control of the property accept the pro | agent: (P.O. B                      | ox NOT acceptable)  acceptable  34236  Cip code)  of process for the above stated corporate as registered agent and agree to accepte to the proper and complete perfo | t in this capaci                       | ace              |

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.

8/28/2017

003.jpg

| 11 Names and business addresses of officers and/or directors:   |                     |            |                  |
|---|---------------------|------------|------------------|
| A. DIRECTORS  |                     |            |                  |
|   |                     |            |                  |
| Chairman:   |                     |            |                  |
| Address:  |                     |            |                  |
|   |                     |            |                  |
| Vice Chairman:  |                     |            |                  |
| Address:  |                     |            |                  |
|   |                     |            |                  |
| Director:   |                     |            |                  |
| Address:  |                     |            |                  |
|   |                     |            |                  |
| Diagram   |                     |            |                  |
| Director:   |                     |            |                  |
| Address:  |                     |            |                  |
|   |                     |            |                  |
| B. OFFICERS   |                     |            |                  |
| President KoSAlyN C. Stevens  |                     | 50         |                  |
| Address: 42/ UAK BYOOK Dr   |                     | 118        | <b>4</b> 75      |
| Columbia 5 C 29227  |                     | 30         | 1                |
| Vice President. Koy M. Stark NS, Sr.  | <b>,</b>            | i          | Greate<br>Greate |
| Address: 421 DAK Brook Dr   |                     | 7          |                  |
| Columbia, S.C. 29223  | 7 <b>40 .</b><br>71 | 22)<br>23) | 1                |
| Secretary.  | _•                  |            | . :              |
| Address:  | ي سية               |            | -                |
| Treasurer: JAMES M. DASLA   | 2-                  |            |                  |
|   |                     |            |                  |
|   |                     |            |                  |
| NOTE: If necessary, ou may attach an addendum to the application listing additional officers and/or directors.  |                     |            |                  |
| 12. Hox M. House, Dr. V. P. 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. |                     |            |                  |
| Koy M. Stevens, Sr. V.P.  |                     |            |                  |
| (Typed or printed name and capacity of person signing application)  |                     |            |                  |

# The State of South Carolina



Office of Secretary of State Mark Hammond

#### **Certificate of Authority**

I, Mark Hammond, Secretary of State of South Carolina, Hereby Certify that:

BIGTRAK TECHNOLOGIES, LLC, a limited liability company duly organized under the laws of the State of Texas, and issued a certificate of authority to transact business in South Carolina on January 16th, 2008, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 18th day of September, 2017.

Mark Hammond, Secretary of State