(Řequestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
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(Business Entity Name)						
(Document Number)						
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### **COVER LETTER**

TO:	Registration Section Division of Corporations			
	HENRY INDUSTRIES, IN	C.		
SUBJ	JECT:			
	Name	e of corporation	- must include suffix	
Dear S	Sir or Madam:			
"Certi	nclosed "Application by Foreign C ficate of Existence," or "Certifica referenced foreign corporation to	te of Good Star	iding" and check are su	act Business in Florida," bmitted to register the
	return all correspondence concer R. Jones, Attorney at Law	ning this matter	to the following:	
		Name of	Person	
Daniel	R. Jones, Attorney at Law, P.C.			
	·	Firm/Com	pany	
P.O. B	ox 520742	11117 0011	,	
		Addro		
Indepe	ndence, MO 64052	Addro	:SS	
DAN@	)DLAWKC.COM	City/State a	nd Zip code	
	E-mail addre	ss: (to be used t	or future annual report	notification)
For fu	rther information concerning this	matter, please c	all:	
Daniel Jones		816	252-0205	
	Name of Person	at ( Area Cod	Daytime Teler	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations		MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building			P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee, FL 32314	
Enclos	sed is a check for the following an	iount:		
<b>=</b> \$70	0.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy



# FLORIDA DEPARTMENT OF STATE Division of Corporations

October 3, 2017

DANIEL R JONES DANIEL R JONES, ATTORNEY AT LAW, PC P.O. BOX 520742 INDEPENDENCE, MO 64052

SUBJECT: HENRY INDUSTRIES, INC.

Ref. Number: W17000078449

We have received your document for HENRY INDUSTRIES, 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):

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.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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: 717A00020016

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

REGISTER A FOR HENRY INDUS		BUSINESS IN THE STATE OF FI	ORIDA.	) T()	
(Enter name of co	orporation; must include "INCORPORATED, orp." "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION	I,"		
KANSAS	able in Florida, enter alternate corporate name		_		
01/12/1993		(FEI number, if applicable) PERPETUAL			
(Date					
7	(SEE SECTIONS 607.1501 & 607.1 PRESS, WICHITA, KS 67226	n Florida, if prior to registration) 502, F.S., to determine penalty liability pal office address)	ty)		
	·	ng address, if different)		28:7	
8. Name and <u>stree</u> Name:	 u	7 007 13			
Office Address:	1200 South Pine Island Road  Plantation	33324		ඩි. ආ	
	(City)	. Florida(Zip code)	•	0	

#### 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.

NRAI Services, Inc.

Michael Jones, 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.

# 11. Names and business addresses of officers and/or directors: A. DIRECTORS Brett C. Henry Chairman: 3843 North Cypress, Wichita, KS 67226 Address: Vice Chairman: \_\_\_\_\_ Brett C. Henry Director: 3843 North Cypress, Wichita, KS 67226 Address: Brent J. Henry Director: 3843 North Cypress, Wichita, KS 67226 Address: \_\_ **B. OFFICERS** Brett C. Henry President: 3843 North Cypress, Wichita, KS 67226 Vice President: Brett C. Henry Secretary: 3843 North Cypress, Wichita, KS 67226 Address: Brett C. Henry Treasurer: 3843 North Cypress, Wichita, KS 67226 Address: \_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director of 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. Brett C. Henry, President 13. \_\_\_

Henry Industries, Inc. continuation page

A. Additional director:

James C. Henry 3843 North Cypress, Wichita, KS 67226

2017 OCT 13 AH 8: 01

## STATE OF KANSAS OFFICE OF SECRETARY OF STATE

### KRIS W. KOBACH

1, KRIS W. KOBACH. Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 2039535

Entity Name: HENRY INDUSTRIES, INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: BRETT C. HENRY

Registered Office: 3843 N Cypress, WICHITA, KS 67226

was filed in this office on January 12, 1993, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

THE OF THE PERSON NAMED IN COLUMN TO PERSON

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of September 26, 2017

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 980702 - To verify the validity of this certificate please visit <a href="https://www.kansas.gov/bess/flow/validate">https://www.kansas.gov/bess/flow/validate</a> and enter the certificate ID number.