Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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		Division of Co	rpo	rations	•
		Fax Number	:	(850) 617-6383	٠.
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	Front				
		Account Name	:	LICENSES ETC INC	
		Account Number	:	120070000159	
		Phone	:	(239)777-1025	•
		Fax Number	:	(977) 275-3593	

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Email .	Address	ETC@LICENS	SES	ETC.COM	

FORMAN PRODUTATION PROPERT CORROR ATION

FOREIGN PROFIT/NONPROFIT CORPORATION JOHNSONKREIS CONSTRUCTION COMPANY, INC.

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COVER LETTER

TO:	Registration Section Division of Corporations	.8. 30		
SHRI	ECT: JohnsonKreis Construction Company, I	nc.		
3000		ation - must include suffix		
Dear S	Sir or Madam:			
"Certif	nclosed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good referenced foreign corporation to transact by	Standing" and check are subm		
	return all correspondence concerning this m	natter to the following:		
	Nam	e of Person		
LICEN	RSES, ETC., INC.			
	Firm/	Company		
886 11	OTH AVE. N., SUITE #6			
	2	Address		
NATL	ES, FL 34108			
	•	ate and Zip j.ode		
SUPPO	ORT@LICENSESETC.COM			
	E-mail address; (to be u	sed for future annual report no	utication)	
For fur	rther information concerning this matter, ple	ase call:		
LISA A	ADAMS 239 at (777-8321		
	Name of Person Area	Code Daytime Telepho	one 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		
Enclos	sed is a check for the following amount:			
☐ \$76	0.00 Filing Fee S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

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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. JohnsonKreis Construction Company, 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) (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 01/26/1998 (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 160 VILLAGE ST., SUITE #100. BIRMINGHAM, AL 35242 (Principal office address) PO BOX 381056, BIRMINGHAM, AL 35238 (Current mailing address; if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) LICENSES, ETC., INC. Name: 886 110TH AVE. N., SUITE #6 Office Address: NAPLES (City) 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.

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.

(Registered agent's signature)

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11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS JESS JOHNSON
President: 5279 GREYSTONE WAY
Address:
WILLIAM KREIS Vice President:
218 STONEGATE DRIVE Address:
BIRMINGHAM, AU 35242
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Signature of Director or Officer
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
(Typed or printed name and capacity of person signing application)

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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 JohnsonKreis Construction Company, Inc. was formed in Shelby County, Alabama on January 26, 1998. The Alabama Entity Identification number for this entity is 192-875. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whercof, 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.

11/14/2017

Date

X 74. Merill

John H. Merrill

Secretary of State