

F17000005707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

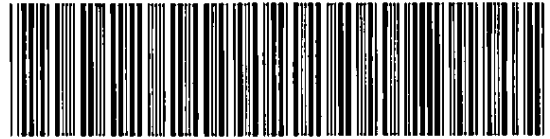
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. WARREN

DEC 20 2017

FILED
2017 DEC 19 10:38
CLERK OF DISTRICT COURT
JANUARY 1, 2018

FILED
17 DEC 19 AM 11:38
CLERK OF DISTRICT COURT
JANUARY 1, 2018

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
e-mail: info@incserv.com



ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 12/19/2017

PRIORITY Routine

OUR REF # (Order ID#) 620104

ORDER ENTITY

LOUTEX CONTRACTORS, INC

PLEASE PERFORM THE FOLLOWING SERVICES:

LOUTEX CONTRACTORS, INC (FL)

File the attached foreign qualification document

Short Form Good Standing Certificate

NOTES:

\$78.75 Authorized

Email for annual report reminders: arclerk@loutex.net

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in cursive script that reads "Melissa".

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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

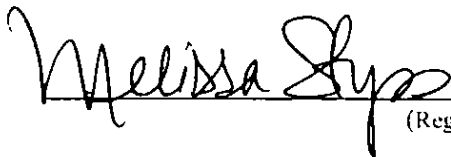
*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. LouTex Contractors, 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. Texas 3. 56-2421914
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-8-03 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 13086 US Highway 84 E. Joaquin, TX 75954
(Principal office address)
- P.O. Box 239, Joaquin, TX 75954
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Incorporating Services, Ltd.
- Office Address: 1540 Glenway Dr.
Tallahassee, Florida 32301
(City) (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.



(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Anthony Harvey

Address: P.O. Box 239

Joaquin, TX 75954

Vice President: J. Michael Harvey

Address: P.O. Box 239

Joaquin, TX 75954

Secretary: Judy Harvey

Address: P.O. Box 239, Joaquin, TX 75954

Treasurer: Judy Harvey

Address: P.O. Box 239, Joaquin, TX 75954

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

12. Judy Harvey 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. Judy Harvey Secretary/Treasurer

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

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17 DEC 19 AM 11:38
CLERK OF SUPERIOR COURT
JACKSONVILLE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Rolando B. Pablos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for LouTex Contractors, Inc (file number 800276437), a Domestic For-Profit Corporation, was filed in this office on December 08, 2003.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 19, 2017.



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State

Come visit us on the internet at <http://www.sos.state.tx.us/>

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Prepared by: SOS-WEB

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Dial: 7-1-1 for Relay Services
Document: 782552220002