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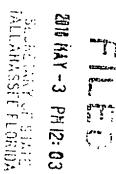
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J. HARRIE

#### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	Crude Consulting, Inc.			
SUDO		me of corporation	- must include suffix	
Dear S	Sir or Madam:			
"Certif	nclosed "Application by Foreigr ficate of Existence," or "Certifi- referenced foreign corporation	cate of Good Stan	ding" and check are sub	
Please Kent F	return all correspondence conc etzer	erning this matter	to the following:	
		Name of I	<sup>2</sup> erson	
Crude	Consulting, Inc.			
2402 S	agramore Place	Firm/Com	pany	
Cape C	Total, FL 33914	Addre	SS	
-		City/State at	nd Zip code	
kfetzer	(a bis.midco.net			
	E-mail add	ress: (to be used f	or future annual report i	notification)
For fu	rther information concerning th	is matter, please c	all:	
Kent F	etzer	70] at (	400-1434	
	Name of Person	Area Code	_) Daytime Telep	hone 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:		
<b>3</b> \$70	0.00 Filing Fee	iling Fee &   Interest of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Status & Certified Copy

#### 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.

Crude Consultir	g, Inc.		
(Enter name of c	orporation: must include "INCORPORATED," "Corp." "Inc." "Co," or "Corp.")	OMPANY," "CORPORATION	
	ble in Florida, enter alternate corporate name ado	oted for the purpose of transacting	g business in Florida)
North Dakota	3.		
(State or countr March 30, 2012	v under the law of which it is incorporated)  5.	(FEI number, if applicable)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
	(Date first transacted business in FI (SEE SECTIONS 607,1501 & 607,1502, Place, Cape Coral, FI, 33914		( <u>v</u> )
	(SEE SECTIONS 607,1501 & 607,1502, Place, Cape Coral, FL 33914		ty i
2402 Sagramore	(SEE SECTIONS 607,1501 & 607,1502, Place, Cape Coral, FL 33914 (Principal c	F.S., to determine penalty liabilit	(y)
2402 Sagramore	(SEE SECTIONS 607,1501 & 607,1502, Place, Cape Coral, FL 33914 (Principal c	F.S., to determine penalty liabilit (fice address) ddress, if different)	ZOB KAY
2402 Sagramore  Name and street  Name:	(SEE SECTIONS 607,1501 & 607,1502, Place, Cape Coral, FL 33914 (Principal of Current mailing a standards) of Florida registered agent: (P.O. 1	F.S., to determine penalty liabilit (fice address) ddress, if different)	MIL ARASSIT
. Name and street	(SEE SECTIONS 607,1501 & 607,1502.  Place, Cape Coral, FL 33914  (Principal of Current mailing a daddress of Florida registered agent: (P.O. 1 Kent Fetzer 2402 Sagramore Place Cape Coral	F.S., to determine penalty liabilit (fice address) ddress, if different)	ALL MINES

#### 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		
Kent Fetzer President:		
2402 Sagramore Place		
Cape Coral, F1, 33914		
Vice President:	-1	291
Address:	Ţſ	<b>3 1</b>
	52	I pre-
Kent Fetzer Secretary:	Tic.	
2402 Sagramore Place, Cape Coral, FL 33914 Address:	50	<u>26. ()</u>
Kent Fetzer Treasurer:		<b>a</b>
2402 Sagramore Place, Cape Coral, FL 33914 Address:	·	
NOTE: If necessary, you may attach an addendum to the application listing addi		
Man of the state o	itional officers and/or direc	ctors.
Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 about are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	ove) affirms that the facts s at to the Department of Sta	stated herein te constitutes

13. Kent Fetzer, Director
(Typed or printed name and capacity of person signing application)

# State of North Dakota SECRETARY OF STATE



### CERTIFICATE OF GOOD STANDING OF

CRUDE CONSULTING, INC.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that CRUDE CONSULTING, INC., a North Dakota BUSINESS CORPORATION, was incorporated in this office on March 30, 2012 and, according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a North Dakota BUSINESS CORPORATION.

**ACCORDINGLY** the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

CRUDE CONSULTING, INC.

Issued: March 27, 2018

Alvin A. Jaeger Secretary of State

Alvin a Jarger