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DIVISION OF CORPORATIONS

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**Florida Department of State
Division of Corporations
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To:

Division of Corporations
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**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

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2018 MAY 29 AM 11:44
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**FOREIGN PROFIT/NONPROFIT CORPORATION
McDaniel Technical Services, Inc.**

Certificate of Status	1
Certified Copy	0
Page Count	04
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May 25, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CORPORATE CREATIONS INTERNATIONAL INC.

SUBJECT: MCDANIEL TECHNICAL SERVICES, INC.

REF: W18000050315

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

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Tim Burch

Regulatory Specialist II Supervisor

FAX Aud. #: E18000160562

Letter Number: 518A00011041

P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

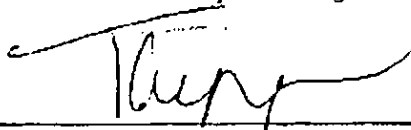
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. McDaniel Technical Services, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
2. Oklahoma 3. 73-1509990
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1/15/1997 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. 2005 N. Yellowwood Ave. Broken Arrow OK 74012
(Principal office address)

(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Corporate Creations Network Inc.
Office Address: 11380 Prosperity Farms Road #221E
Palm Beach Gardens, Florida 33410
(City) (Zip code)

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.



Taylor Page, Special 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.

2018 MAY 29 AM 11:44
DEPARTMENT OF STATE
CORPORATE REGISTRATION

FILED

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Dustin T. McDaniel

Address: 2005 N. Yellowwood Ave. Broken Arrow OK 74012

Director: Marcia McDaniel

Address: 2005 N. Yellowwood Ave. Broken Arrow OK 74012

B. OFFICERS

President: Dustin T. McDaniel

Address: 2005 N. Yellowwood Ave. Broken Arrow OK 74012

Vice President: _____

Address: _____

Secretary: Marcia McDaniel

Address: 2005 N. Yellowwood Ave. Broken Arrow OK 74012

Treasurer: Marcia McDaniel

Address: 2005 N. Yellowwood Ave. Broken Arrow OK 74012

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

12. _____

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. Dustin McDaniel, President

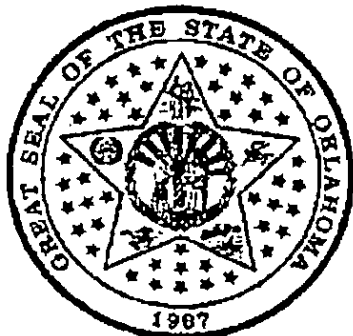
(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE

**CERTIFICATE OF GOOD STANDING
DOMESTIC FOR PROFIT BUSINESS CORPORATION**

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that MCDANIEL TECHNICAL SERVICES, INC. whose registered agent is JERRY D MCDANIEL, with its registered office at 3302 W ATLANTA ST BROKEN ARROW 74012 USA Oklahoma is a Domestic For Profit Business Corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 15th day of May, 2018.

A handwritten signature in cursive script, appearing to read "C. Wall", is written over a horizontal line.

Secretary Of State