

FI000002821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

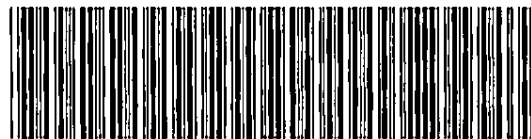
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Intelliquip, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Madison

_____ Intelliquip, Inc.	_____ Name of Person
_____ 18484 Preston Rd Ste 102-409	_____ Firm/Company
_____ Dallas, Texas 75252	_____ Address
_____ sjames@intelliquip.com	_____ City/State and Zip code
_____ E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Michael Madison	972	244-4300
_____ Name of Person	at (_____) Area Code	_____ Daytime Telephone 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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

✓
Please use \$10 balance from the \$35 on account

**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. Intelliquip, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
2. Wyoming 3. 32-0014592
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 7/17/2017 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 7/17/2017
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3 W. Broad Street, Suite #4, Bethlehem, PA 18018
(Principal office address)
- _____
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

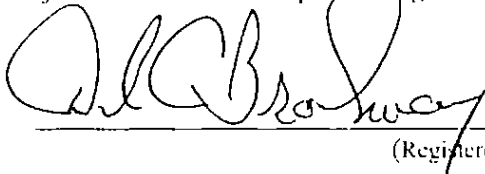
Name: David Brockway

Office Address: 819 Oak Shadows Rd.

Celebration, Florida 34747
(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.



(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.

A. DIRECTORS

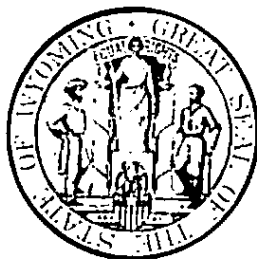
B. OFFICERS

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

13. David Brockway, President
(Typed or printed name and capacity of person signing application)

State of Wyoming

Office of the Secretary of State



United States of America, } ss.
State of Wyoming

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING; do hereby certify that the filing requirements for the issuances of this certificate have been fulfilled.

Intelliquip, LLC a Wyoming Limited Liability Company

Converted To

Intelliquip, Inc. a Wyoming Profit Corporation

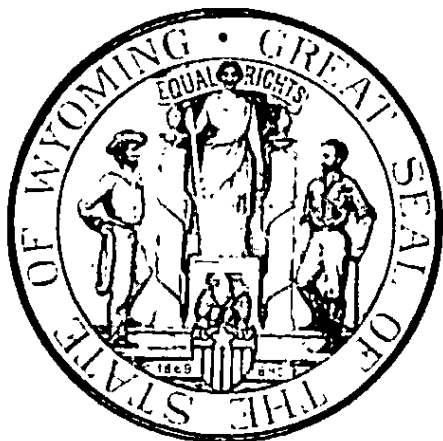
on July 17, 2017

I FURTHER CERTIFY that this entity has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the company in existence in the State of Wyoming.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 29th day of May A.D., 2018.

Edward A. Buchanan

Secretary of State



By *Rosalie Gonzales*

Rosalie Gonzales