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#### **COVER LETTER**

TO:	Registration Section	n							
	Division of Corpor								
	JIM BENDEI	R. INC.							
SUBJ	ECT:								_
		Name o	of corporation	ı - must	include suffix				
Dear S	Sir or Madam:								
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JIM BI	ENDER, INC.								
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DSAN	City/State and Zip code DSANDVIG@JIMBENDER.COM							<del></del> ယ	ŧ
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		E-mail address	: (to be used	ior lutu	re annual report	notification <sub>.</sub>	)		
For fu	rther information cor	ncerning this m	aiter, please	call:					
DOUGLAS C. SANDVIG		515	5 344-2216						
	<del></del>		at (						
	Name of Person		Area Cod	e	Daytime Telep	hone Numb	er		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314					
Γ	ed is a check for the	-							
<b>X</b> \$70	0.00 Filing Fee 🗆	S78.75 Filing Certificate o	g Fee & Conf Status		75 Filing Fee & fied Copy		0 Filing ficate of fied Co	of Stati	us &

## 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. JIM BENDER, INC. 1. (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) NEBRASKA 47-0664259 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) JANUARY 13, 1984 PERPETUAL (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7840 F STREET, OMAHA, NE 68127 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CORPORATION SERVICE COMPANY Name: 1201 HAYS STREET Office Address: TALLAHASSEE

#### 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.

(City)

(Registered agent's signature)

, Florida

(Zip code)

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 BARRETT BOSTICK Chairman: 255 MAGNOLIA AVE, SUITE 200, WINTER HAVEN, FL 33880 Address: Vice Chairman: Address: \_\_ DOUGLAS SANDVIG Director: 255 MAGNOLIA AVE, SUITE 200, WINTER HAVEN, FL 33880 Address: \_\_ RICHARD STRAUGHN Director: 255 MAGNOLIA AVE, WINTER HAVEN, FL 33880 Address: B. OFFICERS BARRETT BOSTICK President: 255 MAGNOLIA AVE. SUITE 200, WINTER HAVEN, FL 33880 Address: Vice President: Address: RICHARD STRAUGHN Secretary; 255 MAGNOLIA AVE, WINTER HAVEN, FL 33880 Address: DOUGLAS SANDVIG Treasurer: 255 MAGNOLIA AVE. SUITE 200, WINTER HAVEN, FL 33880 Address: \_\_ NOTE: If necessary, you may attach an addendym to the application listing additional officers and/or directors. treasurer 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. DOUGLAS SANDVIG, TREASURER

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

### STATE OF NEBRASKA

United States of America, State of Nebraska

} ss.

Secretary of State State Capitol Lincoln, Nebraska

I, John A. Gale, Secretary of State of the State of Nebraska, do hereby certify that

JIM BENDER, INC.

incorporated on January 13, 1984 and is duly incorporated under the law of Nebraska;

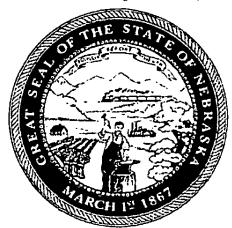
that no occupation taxes due from and assessable against the Corporation are unpaid and have become delinquent;

that no annual or biennial report required to be forwarded by the Corporation to the Secretary of State has become delinquent;

that Articles of Dissolution have not been filed.

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.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

September 12, 2018

Secretary of State