F18000005120

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400320490394





K. SALY

NOV 8 2018

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO	-	120000000195
ACCOUNT	IVO.		エとりひしししししてきる

REFERENCE : 473763 7269114

AUTHORIZATION

COST LIMIT : ()\$\frac{7}{2}0.00

ORDER DATE: November 6, 2018

ORDER TIME : 9:09 AM

ORDER NO. : 473763-010

CUSTOMER NO: 7269114

FOREIGN FILINGS

NAME: INXPO, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: INXPO, Inc.		
Name of corporation - must in	clude suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authoriza "Certificate of Existence," or "Certificate of Good Standing" and above referenced foreign corporation to transact business in Flor	i check are submitted to register the	
Please return all correspondence concerning this matter to the fo	llowing:	
Robyn Christenson		
Name of Person		
West Corporation		
Firm/Company		
11808 Miracle Hills Drive		
Address		
Omaha, NE 68154		
City/State and Zip co	ode	
rchristenson@west.com		
E-mail address: (to be used for future	annual report noull catton)	
For further information concerning this matter, please call:		
Robyn Christenson at(402)	716-2098	
	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:		
	Filing Fee & \$87.50 Filing Fee, ed Copy 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.

Enter name of co Inc.," "Co.," "Co	orporation; must include "INCORPO orp," "Inc," "Co," or "Corp.")	ORATED," "C	OMPANY," "CORPORATION,"	
(If name unavails	ble in Florida, enter alternate corpo	rate name adop	oted for the purpose of transacting business in Flo	orida)
Delawar	·e	3.		
(State or country	y under the law of which it is incorp	orated)	(FEI number, if applicable)	
Janua	ry 2, 2008	5.		
	of incorporation)		(Date of duration, if other than perpetual)	
			orida, if prior to registration) F.S., to determine penalty liability)	
11808	(SEE SECTIONS 607.150 Miracle Hills Dr.,	01 & 607.1502, Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154 Office address)	<u>~</u>
11808	(SEE SECTIONS 607.150 Miracle Hills Dr.,	01 & 607.1502, Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154	<u> </u>
	(SEE SECTIONS 607.150 Miracle Hills Dr.,	Omaha, 1 Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154 office address) ddress, if different)	\$ 10 m
	(SEE SECTIONS 607.150 Miracle Hills Dr.,	Omaha, 1 Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154 office address) ddress, if different)	STANTAGE
Name and stree	(SEE SECTIONS 607.150 Miracle Hills Dr., (Cu	Omaha, 1 Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154 office address) ddress, if different)	St. Color St. Co
Name and <u>stree</u>	(SEE SECTIONS 607.150 Miracle Hills Dr., (Cu et address of Florida registered a Corporation Service Company	Omaha, 1 Omaha, 1 (Principal o	F.S., to determine penalty liability) NE 68154 office address) ddress, if different)	SE SECTION OF A PROPERTY OF A

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. If 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.

Corporation Service Company

By:

(Registered agent's signature)

Emily Croft

Asst. Vice President

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.

	es and business addresses of officers and/or directors: CTORS 18 NOV -7 AH 8:
A. DIRE	CTORS LALLAMASS PLORIE
	- CORI
Address: _	·ong
Vice Chair	man:
Address: _	
Director:	Louis Brucculeri
	11808 Miracle Hills Drive
Addiess.	Omaha, NE 68154
Director:	Nancy Disman
	1377 Motor Parkway, Suite 420
	Islandia, NY 11749
B. OFF	ICERS
President:	Ben Chodor
Address:	11808 Miracle Hills Drive
	Omaha, NE 68154
C Vice Pres	ident:Eric Frazier/Nate Brogan
Address:	11808 Miracle Hills Drive
	Omaha, NE 68154
Secretary:	Louis Brucculeri
Address:	11808 Miracle Hills Drive, Omaha, NE 68154
Treasurer	Chris Wikoff
Address:	11000 Miragle Wills Drive Omaha NF 68154
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	Signature of Director of Officer
The office are true a	Signature of Director of Officer cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated here and that he or she is aware that false information submitted in a document to the Department of State constituence felony as provided for in s.817.155, F.S.
	Chris Wikoff, Treasurer
	(Typed or printed name and capacity of person signing application)

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "INXPO, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INXPO, INC." WAS INCORPORATED ON THE EIGHTH DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

18 NOV -7 AN 8: 11
SECRETARY OF STATE
TAIL AHASSET FLORID

Authentication: 203846136

Date: 11-06-18

3774028 8300 SR# 20187506264