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

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COVER LETTER

TO:								
	Division of Corporations Eagle Estate Services.	Ina						
SUBJ	IECT:							
		Name of corporation	ı - must in	clude suffix				
Dear S	Sir or Madam:							
"Certi	nclosed "Application by Fore ficate of Existence." or "Cer referenced foreign corporati	tificate of Good Star	nding'' and	d check are su				
	return all correspondence co Beesinger	oncerning this matter	r to the fo	llowing:				
		Name of	Person					
Eagle	Estate Services Inc							
9300 V	Vade Blvd Ste 100	Firm/Con	npany					
		Addre	ess					
Frisco	TX 75035							
		City/State a	nd Zip co	de				
teresah	@clausa.com	e ny mate a	na zip co	-				
	E-mail :	address: (to be used)	for future	annual report	notification)			
For fu	rther information concerning				·			
Teresa Beesinger		888	404-68	404-6848				
	-	at ()					
	Name of Person	Area Cod	e !	Daytime Telep	phone 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 followi	ng amount:						
\$ \$70		5 Filing Fee & ficate of Status	J \$78.75 Certifie	Filing Fee & d 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. Eagle Estate Services, Inc. (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) 83-2415691 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date of duration, if other than perpetual) 01/01/2019 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9300 Wade Blvd Ste 100 Frisco TX 75035 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Cogency Global Inc. Name: 115 North Calhoun St Ste 4 Office Address: Tallahassee FL . Florida (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.

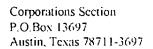
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Charles A Loper III Chairman: 9300 Wade Blvd Ste 100 Address: Frisco TX 75035 Charles Loper Jr. Vice Chairman: 9300 Wade Blvd Ste 100 Address: Frisco TX 75035 Address: Director: **B. OFFICERS** Charles Loper III President: 9300 Wade Blvd Ste 100 Address: Frisco TX 75035 Vice President: James Bradshaw Secretary: 9300 Wade Blvd Ste 100 Frisco TX 75035 Address: _ Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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

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

a third degree felony as provided for in s.817.155, F.S.

13. _____





Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Eagle Estate Services, Inc. (file number 803147658), a Domestic For-Profit Corporation, was filed in this office on October 19, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 04, 2018.





Rolando B. Pablos Secretary of State