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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporat	ions			
	Southwest Telep				
SUBJ	ECT:				
		Name of corporat	ion - mus	t include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence," or	y Foreign Corporation to "Certificate of Good Sociation to transact bus	tanding"	and check are sul	nct Business in Florida," bmitted to register the
Please Adam (nce concerning this ma-	tter to the	following:	
		Name	of Person		
Shumw	ray Van				
		Firm/C	ompany		
368 E I	Riverside Dr., Suite 3A				
 		Ad	dress		
St. Geo	rge, UT 84790				
		City/State	and Zip	code	
adam@	shumwayvan.com				
	E-	mail address: (to be use	d for futi	ire annual report	notification)
For fur	ther information conce	rning this matter, pleas	e call:		
Adam Ott		435	768	-9639	
	Name of Person	at (Area C)	Daytime Telep	hana Mumbun
	Name of Person	AleaC	ode	Daytime Tetep	mone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		ons er Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclos	ed is a check for the fo	llowing amount:			
■ \$70		578.75 Filing Fee & Certificate of Status		75 Filing Fee & fied Copy	☐ \$87.50 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.

tenter name of c	orporation; must include "INCORPORATED," "C	COMPANY," "CORPORATION,"
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida)
Nevada	3	
13/30/2004	y under the law of which it is incorporated)	
4(Date	of incorporation)	(Date of duration, if other than perpetual)
	sacted business in FL	
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502.	orida, if prior to registration) F.S., to determine penalty liability)
	r Ave Suite 200, Las Vegas, NV 89123	
	(Principal ove #100, Las Vegas, NV 89123	office address)
- <u></u>	///	
	(Current mailing a	ddress, if different)
	(Current mailing a	ddress, if different)
8. Name and stree	Current mailing a et address of Florida registered agent: (P.O. E	, and the second
		, and the second
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. E InCorp Services, Inc.	, and the second
Name:	et address of Florida registered agent: (P.O. E	, and the second
Name:	et address of Florida registered agent: (P.O. Electric Encorp Services, Inc. 17888 67th Court North Loxabatchee	Box NOT acceptable) 33470
Name:	et address of Florida registered agent: (P.O. Electric Encorp Services, Inc. 17888 67th Court North Loxabatchee	Box NOT acceptable)
Name: Office Address:	et address of Florida registered agent: (P.O. Electrop Services, Inc. 17888 67th Court North Loxahatchee (City)	Box NOT acceptable) 33470
Name: Office Address: 9. Registered ag	et address of Florida registered agent: (P.O. El InCorp Services, Inc. 17888 67th Court North Loxahatchee (City)	Box NOT acceptable) 33470 Contract (Zip code)
Name: Office Address: O. Registered age Having been name designated in this	et address of Florida registered agent: (P.O. El InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) ent's acceptance: red as registered agent and to accept service of application, I hereby accept the appointment	Box NOT acceptable) 33470 Cip code) Of process for the above stated corporation at the place at as registered agent and agree to act in this capacity.
Name: Office Address: 9. Registered ag: Having been nam designated in this further agree to c	et address of Florida registered agent: (P.O. El InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) ent's acceptance: red as registered agent and to accept service of application, I hereby accept the appointment	Box NOT acceptable) 33470 T. Florida (Zip code) of process for the above stated corporation at the place as registered agent and agree to act in this capacity. tive to the proper and complete performance of my
Name: Office Address: P. Registered ag: Having been nam designated in this further agree to c	et address of Florida registered agent: (P.O. El InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) ent's acceptance:	Box NOT acceptable) 33470 T. Florida (Zip code) of process for the above stated corporation at the place as registered agent and agree to act in this capacity. tive to the proper and complete performance of my
Name: Office Address: 9. Registered ag: Having been nam designated in this further agree to c	et address of Florida registered agent: (P.O. El InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) ent's acceptance:	Box NOT acceptable) 33470 T. Florida (Zip code) of process for the above stated corporation at the place as registered agent and agree to act in this capacity. tive to the proper and complete performance of my

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 JUSTIN SU Chairman: 8275 S. EASTERN AVE., STE. 200 Address: LAS VEGAS, NV 89123 Vice Chairman: Address: __ __ __ **GARTH WALKER** Director: 14523 REDBUD VALLEY TRAIL Address: HOUSTON, TX 77062 SHAWN SIMS Director: 2653 SMOOTH BLEND PL Address: HENDERSON, NV 89052 **B. OFFICERS GUY CONNOR** President: 823 PILOT RD., STE. A Address: LAS VEGAS, NV 89119 Vice President: Address: ___ ANDRE YOUNG Secretary: 8275 S. EASTERN AVE., STE. 200, LAS VEGAS, NV 89123 Address: _ ANDRE YOUNG Treasurer: 8275 S. EASTERN AVE., STE. 200, LAS VEGAS, NV 89123 Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. s/ Justin Su 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.

	Justin Su, Director		
13.			
		(Typed or printed name and capacity of person signing application)	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SOUTHWEST TELEPHONE COMPANY**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 20, 2004, and is in good standing in this state.

OF THE STATE OF TH

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 3, 2019.

Bullana K. Cegarske

Barbara K. Cegavske Secretary of State

Electronic Certificate

Certificate Number: C20190103-1539