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M. MILLIGAN

JAN 25 2019

COVER LETTER

TO:	Registration Section Division of Corporations					
SHR	GULF COA	AST COMMERCIAI	L, INC.			
SOD		Name of	corporation -	must include suffix		
Dear S	Sir or Madam:					
"Certi		" or "Certificate of	f Good Stand	ing" and check are sub	ect Business in Florida." comitted to register the	
	e return all correspo S DAVIS	ndence concerning	this matter t	o the following:		
	<u>-</u>		Name of Pe	erson		
IST U	NITED CRS, LLC					
4211 (CAPITAL CIRCLE N	ıw	Firm/Comp	any		
			Addres	s		
TALL	AHASSEE, FL 3230	3				
		(City/State and	l Zip code		
cc@u	niteders.com					
		E-mail address: (to be used to	r future annual report	notification)	
For fu	rther information c	oncerning this mat	ter, please ca	11:		
JAMES DAVIS			850	322-7117		
	Name of Person	at	Area Code	Daytime Telep	hone 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		
	sed is a check for th	e following amour \$78.75 Filing F Certificate of S	Fee & □	\$78.75 Filing Fee & Certified 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.

	orporation; must include "INCORPORATED, orp.," "Inc.," "Co.," or "Corp.")	" "COMPANY," "CORPORATION,"				
GULF COAST	COMMERCIAL OF OK, INC					
•	able in Florida, enter alternate corporate name		ousiness in Florida)			
OK 2.	3.	82-2992303				
(State or counti	y under the law of which it is incorporated)	(FEI number, if applied	cable)			
9/30/17 4.	5.	Perpetual				
	e of incorporation)	(Date of duration, if other tha	in perpetual)			
Upon Registrati	Upon Registration					
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty liability)				
,	PARK BLVD. EDMOND, OK 73013 (Princi	pal office address)				
14709 BRISTOL	PARK BLVD, EDMOND, OK 73013		~3			
	(Current maili	ng address, if different)				
8. Name and stree	et address of Florida registered agent: (P. 1st United CRS, LLC	O. Box <u>NOT</u> acceptable)	JAN 25 AK			
Office Address:	4211 Capital Circle NW		9: 2 201 2			
	Tallahassee	32303 , 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.

(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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Address: _____ Director: ___ **B. OFFICERS** President: Address: MARK STROUD Vice President: 14709 BRISTOL PARK BLVD. Address: **EDMOND, OK 73013** Secretary: __ Address: Treasurer: Address: NOTE: 19 nycessary, yournay 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 a third degree felony as provided for in s.817.155, F.S. MARK STROUD 13.

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>GULF COAST COMMERCIAL</u>, INC. whose registered agent is UNITED STATES CORPORATION AGENTS, INC., with its registered office at 6400 AVONDALE DRIVE SUITE 200 OKLAHOMA CITY 73116 <u>USA</u> Oklahoma is a <u>Domestic For Profit Business Corporation</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. 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. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 22nd, day of January, 2019.

Secretary Of State