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| Special Instructions to Filing Officer: |
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 2, 2019

TODD JOHNSON 305 MKL STREET SOUTH APT 410 SAINT PERTERSBURG, FL 33705 US

SUBJECT: CONSOLIDATED COMMERICAL SERVICES ASSOCIATION INC.

Ref. Number: W19000010971

We have received your document for CONSOLIDATED COMMERICAL SERVICES ASSOCIATION INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 919A00002399

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: Consolidated Commercial Services Ass | ociation Inc. |
| | ation - must include suffix |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by | - |
| Please return all correspondence concerning this m | atter to the following: |
| Todd Johnson | |
| Nam | e of Person |
| Consolidated Commercial Services Association Inc. | |
| Firm/ | Company |
| 305 MLK Street South #410 | |
| A | Address |
| Saint Petersburg, Florida 33705 | |
| City/Sta | ate and Zip code |
| si@pacificbluehn.com F-mail address: (to be u | sed for future annual report notification) |
| · | <u>.</u> |
| For further information concerning this matter, ple | ase call: |
| Todd Johnson at (917 | 743-1895 |
| at (| Code 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: | |
| □ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy Certified Copy Certified Copy |

FILED

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.

| (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Oklahoma (State or country under the law of which it is incorporated) (PEI number, if applicable) 4. 1/22/2019 5. perpetual (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 305 MLK Street South #410 Saint Petersburg, FL 33705 (Principal office address) (Current mailing address, if different) Name: Todd Johnson Office Address: 305 MLK Street South #410 Saint Petersburg (City) (City) (City) Registered agent's acceptance 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) | 1. 0 | Consolidated Co | mmercial Services Association Inc. | | | _ |
|--|---------------------|--|--|---|----------------|--|
| 2. Oklahoma (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 1/22/2019 (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 305 MLK Street South #410 Saint Petersburg, FL 33705 (Principal office address) (Current mailing address, if different) Name: Todd Johnson Office Address: 305 MLK Street South #410 Saint Petersburg (City) Saint Petersburg (City) 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. | | | | "COMPANY," "CORPORATION," | | |
| (State or country under the law of which it is incorporated) (PEI number, if applicable) 4. 1/22/2019 | (I | f name unavaila | able in Florida, enter alternate corporate name a | dopted for the purpose of transacting busine | ss in Florida) | <u> </u> |
| (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 305 MLK Street South #410 Saint Petersburg, FL 33705 (Principal office address) (Principal office address) (Current mailing address, if different) Name: Todd Johnson Office Address: 305 MLK Street South #410 Saint Petersburg (City) (Cit | 2. 0 | Oklahoma | 3. | 83-2350720 | | _ |
| (Date of incorporation) (Date of duration, if other than perpetual) 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7.305 MLK Street South #410 Saint Petersburg, FL 33705 (Principal office address) (Current mailing address, if different) Name: Todd Johnson Office Address: 305 MLK Street South #410 Saint Petersburg (City) (City) | - 7 | State or countr | y under the law of which it is incorporated) | (FEI number, if applicable) |) | |
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| Office Address: 305 MLK Street South #410 | 8. N | lame and stree | et address of Florida registered agent: (P.O | . Box NOT acceptable) | ن ال | = 1 |
| Office Address: 305 MLK Street South #410 | | Namai | Todd Johnson | | | <u>-10</u> |
| Saint Petersburg Saint Petersburg (City) Negistered 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. | | Name. | Todd Johnson | | | |
| Saint Petersburg (City) (Cit | Offi | ce Address: | 305 MLK Street South #410 | | 골 | <u>က</u> ု |
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| 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. Docusioned by: told jointson 12003980E5240A | | | | | | |
| todd johnson | Hav desi furt | ing been nam gnated in this her agree to c | ed as registered agent and to accept servio application, I hereby accept the appointm omply with the provisions of all statutes re | ent as registered agent and agree to ac elative to the proper and complete perfo | ct in this caj | pacity. I |
| (Registered agent's signature) | | | (todd johnson | | | |
| | | | (Registered a | gent's signature) | | |

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

11. Names and business addresses of officers and/or directors:

| A. DIRECTORS | |
|---|---------------------------------------|
| Chairman: Todd Johnson | |
| Address: 305 MLK Street South Saint Petersburg, FL 33705 | |
| | |
| Vice Chairman: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| | |
| B. OFFICERS | 2019 P |
| President: | MAR TAHAR |
| Address: | in I |
| | |
| Vice President: | |
| Address: | |
| | |
| Secretary: | |
| Address: | |
| Treasurer: | · · · · · · · · · · · · · · · · · · · |
| Address: | |
| NOTE: If necessary, you may attach an addendum to the application listing additional journal. | tional officers and/or directors. |
| 12 | |
| Signature of Director or Officer | |
| The officer or director signing this document (and who is listed in number 11 above re true and that he or she is aware that false information submitted in a documenthird degree felony as provided for in s.817.155, F.S. | |
| 3. Todd Johnson | |
| (Typed or printed name and capacity of person signing at | oplication) |

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.

ASSOCIATION INC. whose registered agent is <u>LEGALINC CORPORATE</u> <u>SERVICES INC.</u>, with its registered office at <u>624 S. DENVER SUITE 300A TULSA</u> <u>74119 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