(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

TO Florida Department of State

Division of Corporations, Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 4/9/2019

PRIORITY Routine

OUR REF # (Order ID#) 734352

ORDER ENTITY

SUPREME ARMORED, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

File the attached foreign qualification document

NOTES:

\$70.00 Authorized

Email address for annual report reminder: contactus@corpcreations.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, April 09, 2019 Page 1 of 1

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 c "Inc.," "Co.," "C	corporation; must include "INCO! Corp," "Inc," "Co," or "Corp.")	RPORATED," "COMPANY," "CORPORATION,"	
1			
lf name unavail	able in Florida, enter alternate co	propriate name adopted for the purpose of transacting business in Flo	orida)
Texas		3	_ -1
(State or count	ry under the law of which it is inc	corporated) (FEI number, if applicable)	1 = -
December 4, 20			<u>-</u> ,
(Date	of incorporation)	5. (Date of duration, if other than perpetual)	
Jpon filing			41.
1		eted business in Florida, if prior to registration) 1501 & 607.1502, F.S., to determine penalty liability)	-
000 Sagamore 1	Parkway S., Lafayette, IN 47905		:-
		(Principal office address)	
Name and stre	et address of Florida registere Corporate Creations Network,	d agent: (P.O. Box NOT acceptable), Inc.	
1	111380 Prosperity Farms Roa	ad #212E	
ice Address:	Palm Beach Gardens	33410	
	50001 0010010		
•	(City)	, Florida(Zip code)	
1			
ving been nan ignated in this ther agree to c	application, I hereby accept comply with the provisions of	o accept service of process for the above stated corporation of the appointment as registered agent and agree to act in this all statutes relative to the proper and complete performance obligations of my position as registered agent.	s capacit
ving been nan ignated in this ther agree to c	ned as registered agent and to application, I hereby accept comply with the provisions of	the appointment as registered agent and agree to act in thi. all statutes relative to the proper and complete performanc	s capacii

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: _ Michael N. Pettit Director: 1000 Sagamore Parkway S., Lafayette, IN 47905 Jeffery L Taylor Director: 1000 Sagamore Parkway S., Lafayette, IN 47905 Address: **B. OFFICERS** Michael N. Pettit President: Address: 1000 Sagamore Parkway S., Lafayette, IN 47905 Vice President: & Asst. Treasurer: Jeffery L. Taylor 1000 Sagamore Parkway S., Lafayette, IN 47905 Malanie D. Margolin Sccretary: 1000 Sagamore Parkway S., Lafayette, IN 47905 & Asst. Secretary: Anna C. Brown 1000 Sagamore Parkway S., Lafayette, IN 47905 NOTE: If necessary you may attach an addendam 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. Melanie D. Margolin Secretary

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



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 Supreme Armored, Inc. (file number 801693875), a Domestic For-Profit Corporation, was filed in this office on December 04, 2012.

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 April 09, 2019.



David Whitley Secretary of State

(512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 880755950003