

F19 000004604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

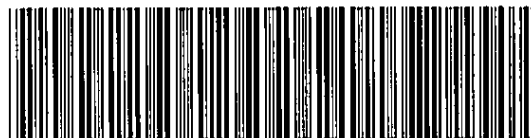
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TAMARAC, FL 33409

2019 SEP 24 PM 2:13

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CR
10-15-19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Midstates Home Improvement, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

| | |
|---|---|
| <u>Patrick J. Nordlund</u> | _____ Name of Person |
| <u>Midstates Home Improvement, Inc.</u> | _____ Firm/Company |
| <u>PO Box 51265</u> | _____ Address |
| <u>Billings, Montana 59105</u> | _____ City/State and Zip code |
| <u>mhi@genet.com</u> | _____ E-mail address: (to be used for future annual report notification) |

For further information concerning this matter, please call:

| | | |
|----------------------------|-------------------|--------------------------|
| <u>Patrick J. Nordlund</u> | at (<u>406</u>) | <u>696-7186</u> |
| Name of Person | Area 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:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certificate of Status & Certified Copy |
|---|---|---|---|

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

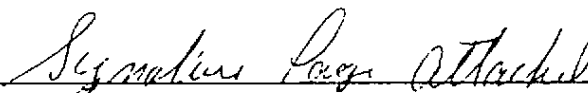
*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Midstates Home Improvement, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- All-Storm Repairs
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Nevada 3. 27-1854884
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 15, 2010 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
We have not done business in Florida, and will not until authorized to do so.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6215 Horsethief Lane Shepherd, Montana 59079
(Principal office address)
PO Box 51265 Billings, Montana 59105
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Pacific Registered Agents
Office Address: 5647 110th Ave N
Royal Palm Beach, Florida 33411
(City) (Zip code)

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STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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.

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.

Midstates Home Improvement, Inc.

1. Enter name of corporation must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Int.," "Co.," or "Corp."

All State Repairs

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Nevada, 27-1854984

2. (State or country under the law of which it is incorporated) (FEI number, if applicable)
Montana 59079

4. (Date of incorporation) (Date of duration, if other than perpetual)
We have not done business in Florida and will not until authorized to do so.

6. (Date first transacted business in Florida, if prior to registration)
(SEE STATUTES 607.1501 & 607.1502, F.S., to determine penalty liability)
675 Horseshoe Lane, Shepherd, Montana 59079

(Principal office address)
P.O. Box 51268, Billings, Montana 59105

(Current mailing address, if different)

8. Name and street address of Florida registered agent (P.O. Box NOT acceptable)

Name Pacific Registered Agents, Inc.

Office Address 5647 110th Ave. North

Royal Palm Beach


Florida 33411

(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.



Charles F. Mathias, President, Pacific Registered Agents, Inc.

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.

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OFFICE OF STATE
CLERK
TAMPA, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Patrick J Nordlund

Address: 6215 Horsethief Lane
Shepherd, Montana 59079

Vice President: Judy L. Nordlund

Address: 6215 Horsethief Lane
Shepherd, Montana 59079

Secretary: Judy L. Nordlund

Address: 6215 Horsethief Lane Shepherd, Montana 59079

Treasurer: Patrick J. Nordlund

Address: 6215 Horsethief Lane Shepherd, Montana 59079

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Patrick J. Nordlund

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.

13. Patrick J. Nordlund

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

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CLERK OF STATE
TREASURY DIVISION

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected 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, corporations sole, 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, **MIDSTATES HOME IMPROVEMENT, INC.** as a **DOMESTIC CORPORATION** (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 01/15/2010, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 09/19/2019.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B20190919229673

You may verify this certificate
online at <http://www.nvsos.gov>