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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Email Address:__

Account Number: I2009000081 Phone: (307)200-2803 Fax Number: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION

BC & L, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
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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. BC & L, Inc.					
			ED," "	COMPANY," "CORPORATION,"	
_					
(If	name unavaila	of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Corp," "Inc," "Co," or "Corp.") IONAL PENSIONS INC vailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 3. 74-1619954 untry under the law of which it is incorporated) (FEI number, if applicable) Fob 6, 1969 Oute of incorporation) (Date of duration, if other than perpetual) Unit 25, 2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) I STE 300 St. Petersburg, FL 33702 (Principal office address) I Austin TX 78766 (Current mailing address, if different) Street address of Florida registered agent: (P.O. Box NOT acceptable) Street Agents Inc. 7901 4th St N STE 300 St. Petersburg , Florida 33702			
2. Te	exas		3.	74-1619954	
		under the law of which it is incorporated	, –	(FEI number, if applicable)	
4	F.	h 6.1969	5.		
¬· <u> </u>			J	(Date of duration, if other than perpetual)	
6.	بال	n 25, 2018			
o		(Date first transacted busine	ss in Fi	orida, if prior to registration)	
		(SEE SECTIONS 607.1501 & 60	7.1502	, F.S., to determine penalty liability)	
7. 790	1 4th St N STI	E 300 St. Petersburg, FL 33702			
		(Pri	ncipal	office address)	
PC) Box 9201 Aus	stin TX 78766			
_		(Current m	ailing	ddress, if different)	
					513
8. Na	ame and stree	t address of Florida registered agent:	(P.O.	Box NOT acceptable)	٠
	Mamai	Registered Agents Inc.			
	Name:	regarded rights me.			
Offic	e Address:	7901 4th St N STE 300		_	= ;
		St. Petersburg		Florida 33702	ယ္
		(City)	••	(Zip code)	7

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 Agents Inc.

Bill Havre - Assistant Secretary

(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: KEVIN CHAPMAN	
Address: 7901 4th St N STE 300	
St. Petersburg, FL 33702	
Vice Chairman: CARRIE CABRITO	
Address: 7901 4th St N STE 300	
St. Petersburg, FL 33702	
Director: NYLE LEFTWICH	
Address: 7901 4th St N STE 300	
St. Petersburg, FL 33702	
Director:	
Address:	
B. OFFICERS	
President: MYLE LEFTWICH	
Address: 7901 4th St N STE 300	
St. Petersburg, FL 33702	
Vice President:	
Address:	
Address.	
Secretary: KEVIN CHAPMAN	
Address: 7901 4th St N STE 300 St. Petersburg, FL 33702	
Treasurer: NYLE LEFTWICH	
Address: 7901 4th St N STE 300 St. Petersburg, FL 33702	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12. Ke S · Change Signature of Director or Officer	
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 here	n tec
are true and that he or she is aware that false information submitted in a document to the Department of State constitute a third degree felony as provided for in s.817.155, F.S.	, CO
a limb degree teleny as provided for in social services, as	
13. Chair man of the Board (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, Legacy Filing for BC&L, Inc. (file number 25692300), a Domestic For-Profit Corporation, was filed in this office on February 07, 1969.

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 December 20, 2019.



Phone: (512) 463-5555

Ruth R. Hughs Secretary of State