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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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TALLAHASSEE, FIORIE





## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Bering Home Center, Inc.				
	of corporation -	must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to transcriptions."	of Good Stand	ing" and check are sub	et Business in Florida," mitted to register the ALL NHASS	
Please return all correspondence concerning	ng this matter t	o the following:	A	
Mary Thomas	Mary Thomas			
	Name of P	erson	E P	
Thomas, Thomas & Thomas, PC	PM 3: 33			
	Firm/Comp	any	33	
11615 Spring Cypress Rd, Ste. E			)>	
	Addres	s		
Tomball, TX 77377				
	City/State and	l Zip code		
JRobinson@berings.com				
E-mail address	: (to be used fo	r future annual report r	nonfication)	
For further information concerning this ma	atter, please ca	11:		
Mary Thomas	at ( 281	684-4860		
Name of Person	Area Code	Daytime Telepi	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amo Please make check payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate o	EPARTMENT ( g Fec &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

Bering Home Co	enter, Inc.				
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION;"			
(If name unavail	able in Florida, enter alternate corporate name ad-	opted for the purpose of transacting business in Florida)			
Texas		74-1094511			
(State or countr 2/9/1950	y under the law of which it is incorporated)	(FEI number, if applicable)			
(Date not applicable	of incorporation)	(Date of duration, if other than perpetual):			
, 6102 Westheimer	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 Rd., Houston, TX 77057-4599	lorida, if prior to registration)			
	(Principal office	street address)			
	(Current mailing	address, if different)			
3. Name and street	et address of Florida registered agent: (P.O. )	Box NOT acceptable)			
Name:	CT Corporation System				
Office Address:	1200 South Pine Island Rd, Stc. 250	<del></del>			
	Plantation	, Florida <sup>33324</sup>			
	(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.

Bree Zahner - 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. For initial indexing purposes, list names, fitles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS	l L				
□ Chairman	Name:	☐Chairman Name: Heather Bering Mafrige			
□Vice Chairman	Address:	□Vice Chairman	Address: 6102 Westheimer Rd. Houston, TX 77057		
Director	Houston, TX 77057	□Director			
■ President		President			
□Vice President		■Vice President			
☐ Secretary	☐Treasurer	□Secretary		□Treasurer	
□Other	Other	Other	<del></del>	□ Other	
□Chairman □Vice Chairman □Director	Name: John Robinson  Address: 6102 Westheimer Rd.  Houston, TX 77057	□Chairman □Vice Chairman □Director	Name:	ASSEEST	
□President		☐ President		57 23:	
□Vice President		□Vice President		Dr. O	
Secretary	□Treasurer	☐ Secretary		☐Treasurer	
CFO CFO	Other	□Other	<del></del>	Other	
□ Chainnan	Name:	□Chai⊓nan	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director			
□President ·		President			
□ Vice.President		□Vice President			
☐ Secretary	☐Treasurer	Secretary		☐ Treasurer	
Other	Other	□Other	·-··	□Other	
Important Notice: individuals may be	Use an attachment to report more than six (6). The attended to the index when filing your Florida Department of Director	pent of State Annual Re	enort form		
The officer or dire she is aware that f s.817.155, F.S.	cetor signing this document (and who is listed in numbralse information submitted in a document to the Department of the Department of the Department of Dobraser CF (Typed or printed name and capacity of per	per 11 above) affirms the	nat the facts sta utes a third deg	ited herein are true and that he or	
	•	<del></del>			

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



Ruth R. Hughs Sceretary of State

## 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 BERING HOME CENTER, INC. (file number 10177800), a Domestic For-Profit Corporation, was filed in this office on February 09, 1950.

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 May 19, 2020.



Ruth R. Hughs Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709

TID: 10264

Dial: 7-1-1 for Relay Services Document: 971167460003