

F21000000981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

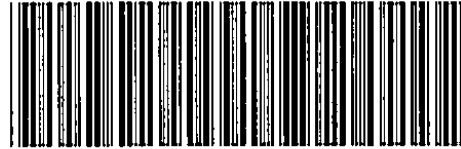
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W21000009713 00647

Office Use Only



2003586713

01/25/21--01021--009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arrowhead Promotion & Fulfillment Company, Incorporated
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:

Deb Adams

Name of Person

Arrowhead Promotion & Fulfillment Co., Inc.

Firm/Company

1105 SE 8th Street

Address

Grand Rapids, MN 55744

City/State and Zip code

deba@apfco.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deb Adams

at (218) 327-8680 x 287

Name of Person

Area Code

Daytime Telephone 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 amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing
Certificate of
Certified Cop

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRAN BUSINESS IN FLORIDA

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

1. Arrowhead Promotion & Fulfillment Company, Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "In.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Fl
2. Minnesota 3. 41-1446101
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/25/1983 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 1/4/2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 300 Marquesas Court, Marco Island, FL 34145
(Principal office street address)
- _____
(Current mailing address, if different)

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

Name: Catherine Prokop Christmas

Office Address: 300 Marquesas Court
Marco Island, Florida 34145
(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 as designated in this application, I hereby accept the appointment as registered agent and agree to act in this further agree to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligations of my position as registered agent.

DocuSigned by:
Catherine Prokop Christmas
3908C730B4E74C1
(Registered agent's signature)

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

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

A. DIRECTORS

☒ Chairman Name: Catherine Prokop Christmas, CEO

☐ Vice Chairman Address: 300 Marquesas Court

☐ Director Marco Island, FL 34145

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Gerald Schneider

☐ Vice Chairman Address: 1105 SE 8th Street

☐ Director Grand Rapids, MN 55744

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

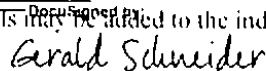
☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.



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 she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as per s.817.155, F.S.

13. Gerald Schneider, President

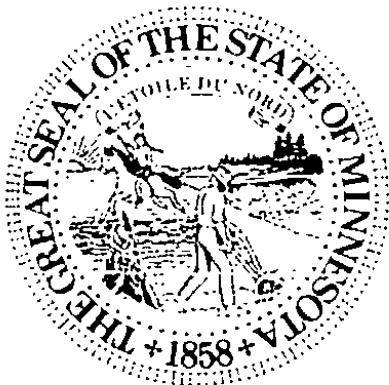
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Arrowhead Promotion and Fulfillment Company, Incorporated
Date Filed:	03/25/1983
File Number:	4I-271
Minnesota Statutes, Chapter:	302A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 01/14/2021



Steve Simon

Steve Simon
Secretary of State
State of Minnesota



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2021

DEB ADAMS
1105 SE 8TH STREET
GRAND RAPIDS, MN 55744 US

SUBJECT: ARROWHEAD PROMOTION & FULFILLMENT CO, INC.
Ref. Number: W21000009713

We have received your document for ARROWHEAD PROMOTION & FULFILLMENT CO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 521A00002161

RECEIVED
FEB 16 2021