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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: QC TV Corp.					
Nan	ne of corporation	- must include suffix			
Dear Sir or Madam:					
The enclosed "Application by Foreign "Certificate of Existence," or "Certificate of Existence," or "Certificate of Existence," or "Certificate of Existence," or "Certificate of Existence	ate of Good Stand	ling" and check are subr			
Please return all correspondence conce	rning this matter	to the following:			
Tom Palmer					
1000 <u>- 100 - 1</u>	Name of F	Person			
QC TV Corp					
	Firm/Com	pany			
P.O. Box 691165					
Houston, TX 77269-1165	Addre	ss			
·	City/State ar	d Zip code			
management@qctv.com					
	ess: (to be used fo	or future annual report n	otification)		
For further information concerning this	matter, please ca	all:			
Tom Palmer	_{at (} 281	Daytime Telephone Number			
Name of Person	Area Code	Daytime Teleph	one Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following at Please make check payable to: FLORIDA \$70.00 Filing Fee \$78.75 File Certificat	DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	✓ \$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. QC TV Corp)						
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATIO	N,"			
QCTV Cor	р						
(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transact	ing business i	n Flori	da)	
_{2.} Texas		3.	76-0200200				
-·	under the law of which it is incorporated)	s incorporated) (FEI number, if applicable)					
_{4.} 8/28/1986		5.	perpetual				
(Date of incorporation)		•	(Date of duration, if other than perpetual)				
6n/a							
_{7.} 7038 Belgol			n Florida, if prior to registration) 502, F.S., to determine penalty liab	ility)	<u>*~1</u>		
	(Principal	off	ice <u>street</u> address)				
PO Box 691	165, Houston, TX 77269-116	65		•	77	. 1	
-	(Current ma	ilir	ng address, if different)		27 P	-	
8. Name and stree	t address of Florida registered agent: (Ρ.(D. Box NOT acceptable)	ેલું વધ ભારત			
Name:	Northwest Registered Agen	ıt l	<u>-LC</u>	근길	9h :h 49		
Office Address: 7901 4th St N STE 300				1.1			
	St. Petersburg		, Florida 33702				
	(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.



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.

A, DIRECTORS					
□Chairman	Name: Wanda Palmer	□Chairman	Name: Tom Palmer		
□Vice Chairman	Address: 7038 Belgold St	□Vice Chairman	Address:7038 Belgold St		
□Director	Houston, TX 77066	□Director	Houston, TX 77066		
☑ President		□President			
□Vice President		☑Vice President			
□Secretary	☐Treasurer	Secretary	□Treasurer		
Other	Other	Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director		Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer		
□Other	Other	□Other	Other		
□Chairman	Name:	□Chairman	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: User an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when thing 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 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.

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, Articles Of Incorporation for QC TV CORP. (file number 100911700), a Domestic For-Profit Corporation, was filed in this office on August 28, 1986.

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 24, 2022.



John B. Scott Secretary of State