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SEP - 9 2022 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Flynco, Inc.			
Nan	ne of corporation -	must include suffix	
Dear Sir or Madam:			
	ate of Good Stand	authorization to Transact Business in Flo ing" and check are submitted to register s in Florida.	
Please return all correspondence conce Benjamin Beggs			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Name of P	erson	922 AUG 3 I
Flynco, Inc.			
7711 Distribution Di	Firm/Comp	oany	Server A
Little Rock, AR 722	Addres	is .	9180 L
benjamin.beggs@flyn E-mail addr For further information concerning thi	ress: (to be used fo	or future annual report notification)	
Benjamin Beggs	501	, 565-1228	
Name of Person	Area Code	Daytime Telephone Number	_
STREET/COURIER ADDR Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following a Please make check payable to: FLORIDA S70.00 Filing Fee Certifica	DEPARTMENT	\$78.75 Filing Fee & Z \$87.50 Fil	e of Status &

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.

Arkonoc	·	presented the fundamental and an arrange and arrange and arrange arran	ness in Florida)
Arkansa	IS 3		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
	(Date first transacted business in F	lorida, if prior to registration)	
	Table are contained to the contract	the control of the co	
	tribution Dr., Little Rock, A	417 72209	
	(Principal office	street address)	
	•	street address)	
	•		
Name and stre	•	street address) address, if different)	Entropy of the second s
	(Current mailing et address of Florida registered agent: (P.O.	street address) address, if different) Box NOT acceptable)	Scortinary of
Name and <u>stre</u> Name:	(Current mailing et address of Florida registered agent: (P.O. Registered Agents Inc.	street address) address, if different) Box NOT acceptable)	*! *
	(Current mailing et address of Florida registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300	street address) address, if different) Box NOT acceptable)	*! *
Name:	(Current mailing et address of Florida registered agent: (P.O. Registered Agents Inc.	street address) address, if different) Box NOT acceptable)	ACLEMESSES FLORING

(Registered agent's signature)

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: David Beggs	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	7711 Distribution Dr.	□Director		
⊘ President	Little Rock, AR 72209	□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other	□Other	□Other		□Other
□Chairman	Name: Benjamin Beggs	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	<u> </u>
□Director	7711 Distribution Dr.	□Director		
□President	Little Rock, AR 72209	□President		-
☑Vice President		□Vice President		2022
□Secretary	☐Treasurer	☐ Secretary		> >
□Other	□Other	Other		□Treasgrent □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
□Chairman	Name: William Beggs	□Chairman	Name:	OF SHALL
□Vice Chairman		□Vice Chairman	Address:	
□Director	7711 Distribution Dr.	□Director		
□President	Little Rock, AR 72209	□President		
□Vice President		□Vice President		
□Secretary	∠ Treasurer	□Secretary		□Treasurer
□Other	□ Other	□Other		□Other
	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department			urposes only. Non-indexed

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

8.817.155, F.S.

David Beggs, President

she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in



Arkansas Secretary of State John Thurston

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

FLYNCO, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office February 12, 1980.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 30th day of August 2022.

John Thurston fline Certificate Authorization Code: 1f1f18bb61992c6 Sccretary of State To verify the Authorization Code, visit sos.arkansas.gov

In Thurston