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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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

ryan.riggs@coldironcompanies.com Email Address:___

FOREIGN PROFIT/NONPROFIT CORPORATION COLDIRON COMPANIES INC

Certificate of Status	0
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Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

From: David Thomas

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.

Coldiron Comp	vanies, Inc.				
(Enter name of c "Inc.," "Co.," "C	corporation; must include "INCORPORATED," lorp," "Inc." "Co," or "Corp.")	"COMPA?	NY." "CORPORATION	•	
(If name unavail	able in Florida, enter alternate corporate name a	dopted for t	he purpose of transacting	business in Florida)	
2. Oklahoma		73-1106419	3-1106419		
·	ry under the law of which it is incorporated)		(FEI number, if app	olicable)	
4. 12/5/1980	Š	N/A			
(Date	of incorporation)	(D)	ate of duration, if other t	han perpetual)	
6					
	(Date first transacted business in (SEE SECTIONS 607.150) & 607.150	Florida, if p 2, F.S., to c	rior to registration) letermine penalty liabilit	Υ)	
200 N Sooner Rd	Edmond, OK 73034		, ,,	, .	
,	(Principal office	street add	ress)		
	(Current mailing	address, if	different)		
Name and <u>street</u>	<u>त address</u> of Florida registered agent: (P.O.	Box <u>NOT</u>	_acceptable)		
Name:	C T Corporation System				
Office Address:	1200 South Pine Island Road			2023	
	Plantation	ΓI,	33324)	
	(City)	-	(Zip code)	<u>.</u>	
9. Registered ago	ent's acceptance;			- -	
Having been nam Jesignated in this further agree to co	ed as registered agent and to accept service application. I hereby accept the appointment on ply with the provisions of all statutes relevant and accept the obligations of my posi-	nt as regis ative to the	stered agent and agree c proper and complete	to act in this clipacity. I	
	C l' Corporation System	· -	5		
_ 1	Dan Dan	ton	Kaity Toon, A	sst. Secretary	
	(Registered agent's sign	iature)			

^{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, titles and addresses of the primary officers and/or directors [up to six (6) total]:

E	0	Thomas
From:	LIAVIO	LOCATION

A. DIRECTORS						
□Chairman	Phil Coldiron Name:	### Chairman	Name. Kitrick Eccles			
□ Vice Chairman	Address:	□Vice Chairman	Address: 200 N Sooner Rd			
□Director	Edmond, OK 72034	DDirector	Edinond, OK 73034			
■President		□President				
LJ Vice President	TOP TO THE SANDAL THE CONTROL OF THE CONTROL					
□ Secretary	Cl Treasurer	□ Secretary	(1) Treasurer			
COther		ElOther	Other			
CiChairman	James Ryan Riggs Name:	□Chairman	Name:			
□Vice Chairman	Address: 200 N Sooner Rd	□Vice Chairman				
□Director	Edmond, OK 73034	□Director	78.07.535			
El President		□ President				
■Vice President		□Vice President				
DiSecretary	🗋 Freasurer	☐ Secretary	□Treasurer			
□Other	□Other	□Other	□Other			
□Chairman	Name					
	Name:	□ Chauman	Name:			
	Address:	□ Vice Chairman	Address:			
□ Director		☐Director	The state of the s			
## President		□President	and which the transfer of spirits a memory of spirits delice of the spirits of th			
☐ Vice President ———————————————————————————————————		□Vice President				
□ Secretary	☐T(casurer	□ Secretary	□Treasurer			
□Other	Other	□Other	□Other			
Important Notice: Use an attachment to report more than six (b). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Flori to 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 Strate constitutes a third degree felony as provided for in s.817.155, F.S.						

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

13. Phil Coldiron

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OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>COLDIRON COMPANIES, INC.</u>, whose registered agent is <u>PHIL C COLDIRON</u>, with its registered office at <u>200 N SOONER RD EDMONI)</u> 73034 USA Oklahoma is a Domestic For <u>Profit Business Corporation</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>31st</u>, day of <u>July</u>, 2023.

Pouin Tough