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DATE: 09/12/23

NAME: 1<sup>ST</sup> CHOICE SERVICES, INC.

TYPE OF FILING: APPLICATION

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#### **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJ	ECT: 1st Choice Services, Inc.						
5050		ne of c	orporation -	must	include suffix		
Dear S	ir or Madam:						
"Certif	closed "Application by Foreign icate of Existence," or "Certific referenced foreign corporation	cate of	Good Standi	ng" a	nd check are submit		
Please	return all correspondence conc	erning	this matter to	the f	following:		
Larry (	Gregory						
			Name of Pe	rson			
1st Cho	pice Services, Inc.						
			Firm/Compa	any			
2680 E	. Main St. Suite 325						
			Address	5			
Plainfie	eld, IN 46168						
•		C	ity/State and	Zip o	code		
Istchoi	ceservicesinc@gmail.com						
	E-mail add	ress: (t	o be used for	futur	e annual report noti	fication)	
For fur	ther information concerning thi	is matte	er, please cal	1:			
Larry Gregory		at	at ()83		37-8000		
	Name of Person		Area Code		Daytime Telephor	ne 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		
Please i	ed is a check for the following make check payable to: FLORIDA .00 Filing Fee	DEPA	RTMENT C	\$78.7		□ \$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.

(If name unavai	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florid	da)		
IN	ry under the law of which it is incorporated)	61-1428543			
10/03/2002 (Date	5	(Date of duration, if other than perpetual)			
(5	, , , , , , , , , , , , , , , , , , , ,	(Caro or Caronina Caronina Posporani,			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502				
2680 E. Main St.	Suite 325 Plainfield, IN 46168				
	(Principal office	street address)			
	(Current mailing	address, if different)			
Name and stre	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)			
Name and stre	et address of Florida registered agent: (P.O. Paracorp Incorporated	Box NOT acceptable)			
Name:		Box NOT acceptable)	3033		
Name:	Paracorp Incorporated	7023 SI	2022 CCD		
Name:	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor	Box NOT acceptable)  —  —  —  —, Florida 32301  (Zip code)	2022 550 13		
Name: ffice Address:  Registered ag	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:		-		
Name: ffice Address:  Registered ag aving been nam	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  seed as registered agent and to accept service	, Florida 32301	<b>-</b> Фер		
Name: ffice Address:  Registered ag aving been nan esignated in this	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  ted as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes relations.	of process for the above stated corporation and as registered agent and agree to act in this contive to the proper and complete performance of	ne p pac		
Name: Office Address: Registered aglaving been nan esignated in this	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  seed as registered agent and to accept service to application, I hereby accept the appointme	of process for the above stated corporation and as registered agent and agree to act in this contive to the proper and complete performance of	ne p pac		
Name: Office Address: Registered ag Having been nan Jesignated in this	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  ted as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes relations.	of process for the above stated corporation and as registered agent and agree to act in this contive to the proper and complete performance of	ne p pac		

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.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

A. DIRECTORS								
Chairman	Name:	□Chai⊓nan	Name:					
Vice Chairman	Address: 2680 E. Main St. Suite 325	□Vice Chairman	Address:					
□Director	Plainfield, IN 46168	□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					
□Chairman	Name:	□ Chairman	Name:					
	Address:	□Vice Chairman						
Director		Director						
□President		□President						
□Vice President		□ Vice President						
☐ Secretary		Secretary	☐Treasurer					
_		Other						
Important Notice: Use 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 filing your Florida Department of State Annual Report form.  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								

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

13. Larry Gregory - President

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

**DATE:** 9/11/2023

**ENTITY NAME:** 1st Choice Services, Inc.

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

## State of Indiana Office of the Secretary of State

**CERTIFICATE OF EXISTENCE** 

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

#### **1ST CHOICE SERVICES, INC.**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 03, 2002, and was in existence or authorized to transact business in the State of Indiana on September 11, 2023.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, September 11, 2023

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2002100900142 / 20233366101

All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate

Expires on October 11, 2023.