F24000002596

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

	stration Section ion of Corporations				
SHRIFCT:	Reason Equity Corp.				
SOBJECT.	Namo	of corporation - r	nust include suffix		
Dear Sir or M	ladam:				
"Certificate o	"Application by Foreign C of Existence," or "Certificat need foreign corporation to	e of Good Standir	g" and check are submitt	usiness in Florida," led to register the	
Please return	all correspondence concern	ning this matter to	the following:		
Charles K Wil	kerson				
		Name of Per	rson		
Reason Equity	· Corp.				
		Firm/Compa	ny		
12216 Noreas	Lake Drive				
		Address			
Tampa, Florid	a 33612				
	· · · · · · · · · · · · · · · · · · ·	City/State and	Zip code		
charleskwilke	rson@yahoo.com				
	E-mail addre	ss: (to be used for	future annual report noti	fication)	
For further in	nformation concerning this	matter, please call	:		
Charles K Wi	arles K Wilkerson at () 236-9636				
Nan	ne of Person	Area Code	Daytime Telephon	e Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Sect Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a Please make c ☐ \$70.00 Fi	•	DEPARTMENT O		■ \$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.

(ii name unavair	ible in Florida, enter alternate corporate name a	dopted for the purpose of transacting busine	ess in Florida)
Oklahoma 3.		99-1552934	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
February 2024		perpetual	
(Date of incorporation)		(Date of duration, if other than perpetual)	
n/a			
12216 Noreast La Same		e <u>street</u> address)	
	(Current mailing	g address, if different)	
Name and stree	(Current mailing et address of Florida registered agent: (P.O Charles K Wilkerson		ŹUZ4 APR
Name:	et address of Florida registered agent: (P.O		2014 APR 23
	et address of Florida registered agent: (P.O Charles K Wilkerson		2

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	50 A 17 11 10 10					
Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Tampa, FL 33612	□Director				
President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
Other	Other	□Other	□Other			
□Chairman	Name:	□Chairman	Name:			
_	Tampa, FL 33612					
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
■ Secretary	Treasurer	☐ Secretary	□Treasurer			
□Other	Other	□Other				
			N			
□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: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals pray be added to the index whon fitting 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 a state of the state of						

13. Charles K Wilkerson

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

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.

IFURTHER CERTIFY that <u>REASON EQUITY CORP</u> whose registered agent is <u>CHARLES KEITH WILKERSON</u>, with its registered office at <u>2653 N 377 RD HOLDENVILLE</u> 74848 <u>USA</u> Oklahoma is a <u>Domestic For Profit Business</u> <u>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>16th</u>, day of <u>April</u>, <u>2024</u>.

Secretary Of State