

F95000001081

Kaya 5110
(Requester's Name)
PL 5110
(Address)
San Jose, CA
(City, State, Zip) 39043
(Phone #)

OFFICE USE ONLY

*****78, 75 *****78, 75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Poco 110
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

SUBJECT: KOXC0, LTD. INCORPORATED
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

RONALD ROBBINS
(Name of Person)
KOXC0, LTD.
(Firm/Company)
P.O. Box 64
(Address)
BRANDON, MS 39043
(City, State and Zip Code)

Should you need to call someone concerning this matter, please call:

RONALD ROBBINS at (601) 825-4193 (x3))
(Name of Person) Area Code & Daytime Telephone Number

✓ **COURIER ADDRESS:**

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

65 FEB 7 1985
U.S. DEPT. OF JUSTICE

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

1. TEXCO, LTD. INCORPORATED

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or
abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person
or partnership if not so contained in the name at present.)

2. MISSISSIPPI

(State or country under the law of which it is incorporated)

3. 64-0650724

(FEI number, if applicable)

4. 5/8/81

(Date of incorporation)

5. 2080

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.)

7. P.O. Box 64

BRANDON, MS 39013

(Current mailing address)

8. GENERAL CONTRACTOR

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: EDWARD L. VLOCK

Office Address: 7875 NIAGARA DRIVE

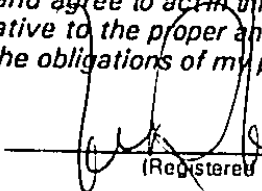
TAMPA

, Florida, 33617

(Zip Code)

10. 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.


(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: BENJAMIN O. TURNAGE, JR.
Address: C/O KOXCO, LTD. P.O. BOX 64
BRANDON, MS 39043

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: BENJAMIN O. TURNAGE, JR.
Address: C/O KOXCO, LTD. P.O. BOX 64
BRANDON, MS 39043

EXEC. Vice President: RONALD ROBBINS
Address: C/O KOXCO, LTD. P.O. BOX 64
BRANDON, MS

Secretary: CHARLES A. YOUNG
Address: C/O KOXCO, LTD. P.O. BOX 64
BRANDON, MS 39043

Treasurer: CHARLES A. YOUNG
Address: C/O KOXCO, LTD. P.O. BOX 64
BRANDON, MS 39043

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. RONALD ROBBINS EXECUTIVE VICE PRESIDENT
(Typed or printed name and capacity of person signing application)

State of Mississippi

Office of the Secretary of State

Dick Molpus, Secretary of State

Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, DICK MOLPUS, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on May 08, 1981 the state of Mississippi issued a Charter/Certificate of Authority to:

ROXCO, LTD.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Secretary of State's office.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand
and seal of office
February 27, 1995



DICK MOLPUS
Secretary of State

CT CORPORATION SYSTEM

F95000001081

900 Olive Street
St. Louis, MO 63101
Tel: (314) 231-8000
Fax: (314) 231-6454

July 17, 1997

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: **ROXCO, LTD.**
(Mississippi Domestic)
Order #: 907728

Counsel: David Carter
Roxco, Ltd.
P.O. Box 64
Brandon, MS 39043

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-07/21/97--01049--004
*****35.00 *****35.00

Gentlemen:

As requested by counsel, we enclose for filing Statement of Change of Registered Agent or Registered Office on behalf of this corporation, together with funds in payment of the required fees.

Evidence of the filing should be returned to this office by regular mail, using the enclosed self-addressed stamped envelope.

If you have any questions or if for any reason the filing cannot be effected promptly, please notify this office of the details by calling our toll-free number: 1-800-325-2671.

Yours truly,

Bonnie L. Love

Bonnie L. Love
Associate Customer Specialist

Enc.

FILED
97 JUL 21 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Due 7/22

R.A. Ching

Florida Department of State, Jim Smith, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Mississippi submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: ROXCO, LTD INCORPORATED

1b. Date of Incorporation 3/7/95 Document number F95000001081

2. The name and address of the current registered agent and office:

Edward L. Vlock, 7875 Niagara Dr., Tampa, FL 33617

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

C T CORPORATION SYSTEM

c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

David R. Carter
SIGNATURE
7/14/97
DATE

DAVID R. CARTER, CFO
Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

C T CORPORATION SYSTEM
SIGNATURE BY Jonathan L. Miles
Jonathan L. Miles (Registered Agent) Asst. Secy.
DATE 7-17-97

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314