

F95000003460

LPG Services Group Inc.
(Requestor's Name)
106 W. 11th St. Suite 2220
(Address)
Kansas City MO 64105
(City, State, Zip) (Phone #)

100001588771
-07/18/95--01051--016
*****70.00 *****70.00

OFFICE USE ONLY

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

1. LPG Services Group Inc.
(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 checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

It 7/19

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 18 AM 11:07

Examiner's Initials	
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
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:

1. LPG Services Group Inc.
(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. Missouri
(State or country under the law of which it is incorporated)
3. 43-1595968
(FEI number, if applicable)
4. 12/14/91
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 1/1/95
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 104 W. 11th St. Ste 2220
Kansas City Mo 64105
(Current mailing address)
8. Wholesale marketer of propane gas
(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: C T CORPORATION SYSTEM
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

John J. Linnihan
(Registered agent's signature) (Officer)

John J. Linnihan-Assst. Vice President
(Type Name and Title of Officer)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 18 AM 11:47

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 jurisdiction under the law of which it is incorporated.

12. Names and addresses of office or directors:

A. DIRECTORS

Chairman: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

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

14. _____

John I Sherman Pres

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

LPG SERVICES GROUP, INC.
OFFICERS AND DIRECTORS

JOHN J. SHERMAN
644 W. 57TH ST.
KANSAS CITY, MO. 64113

PRESIDENT
ASST. SEC.

DIRECTOR
CHAIRMAN

223-86-8747

WILLIAM C. GAUTREUX
501 E. 44TH ST.
KANSAS CITY, MO. 64110

V-P, TREAS
ASST. SEC.

DIRECTOR

440-70-4443

PAUL E. MCLAUGHLIN
1201 WALNUT ST.
KANSAS CITY, MO. 64141

SECRETARY

DIRECTOR

STATE OF MISSOURI



Rebecca McDowell Cook
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF CORPORATE GOOD STANDING

95 JUL 18 AM 11:07

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT
LPG SERVICES GROUP, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 16TH DAY OF DECEMBER, 1991, AND IS IN GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 22ND DAY OF JUNE, 1995.

Rebecca McDowell Cook
Secretary of State



Document Number Only

F95000003460

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

CORPORATION(S) NAME

200002156352--0
-04/28/97--01043--015
*****35.00 *****35.00

LPG Services Group, Inc

☐ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Merger

☒ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ Limited Liability Partnership

☐ Certified Copy

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Other

☐ Change of R.A.

☐ Fictitious Name

☐ CUS

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Call if Problem

☐ Will Wait

☐ After 4:30

☒ Pick Up

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

4/28/97

WTH
LPG
4/28

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY
TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

LPG Services Group, Inc.

(Name of Corporation)

Missouri

(Incorporated Under Laws Of)

FILED
91 APR 28 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

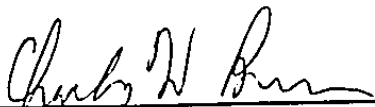
1000 Louisiana, Suite 5800

(Mailing Address)

Houston, Texas 77002

(City - State - Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.



Signature

4-8-97

Date

Charles H. Brownman

Typed or printed name

Vice President

Title

F9500000 2811

WE ARE MOVING!

**EFFECTIVE MAY 1, 1997 PLEASE DIRECT ANY
US DIAGNOSTIC INC. ACCOUNTS PAYABLE
CORRESPONDENCE OR INVOICES TO THE
ADDRESS LISTED BELOW:**

Center Name: Orlando Diagnostic Center

**Address: 1717 S. Orange Avenue, Suite 101
Orlando, FL 32806**

Phone: (407) 849-0367

**ANY QUESTIONS REGARDING PAID OR UNPAID
INVOICES, PLEASE DIRECT YOUR CALLS TO:**

JULIE - (800) 840-6747 EXT. 245

**THANK YOU FOR YOUR PATIENCE DURING
OUR TRANSITION PERIOD.**

*JB
5-8-97*

F95000003460
 STATE OF FLORIDA
 OFFICE OF THE COMPTROLLER
 APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: LPG SERVICES GROUP, INC. EIN or SS#: 43-1595968

Address: 1000 LOUISIANA, SUITE 5800
HOUSTON, TX 77002-5050

Amount: \$165.00 Date Paid _____

Reason for claim: Corp. Withdraw - no A/R required - F95000003460
BPI 5-13-97

Certified true and correct this 2nd day of JUNE, 19 97.

Signature [Signature]

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	
Amount of recommended refund \$	<u>165.00</u>
The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on	
State Treasurer's Receipt No.	<u>964711/022</u> dated <u>05-07-97</u>
Name of Account	<u>4520213000145300000000000010000</u>
Statutory Authority for Collection	<u>000</u>
It is requested that payment be made from the following account:	
NAME OF ACCOUNT	<u>4520213000145300000000220020000</u>
Certified true and correct this	day of _____, 19 _____
Department of State, Division of Corporations	(Authorized Signature and Title)