

# F96000000824

Mid  
America  
Point of  
Sale, Inc.

15 North Adams, P.O. Box 1686  
Hutchinson, Kansas 67504-1686

000001612280  
-10/17/95--01010--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

OFFICE USE ONLY

900001719549  
-02/26/96--01078--001  
\*\*\*\*\*2376.00 \*\*\*\*\*2376.00

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

W95-20670

1. MID-AMERICA POINT OF SALE, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

900001719549  
-02/20/96--01107--001  
\*\*\*\*\*24.00 \*\*\*\*\*24.00

- ☐ 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

1-2  
2/19  
96 FEB 19 AM 11:42  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
FILED

Examiner's Initials

## TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: MID. AMERICA Point of Sale, Inc.  
(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:

Mark A. Wells

(Name of Person)

MID. AMERICA Point of Sale, Inc.

(Firm/Company)

P O Box 1688

(Address)

Hutchinson, KS 67504-1688

(City/State/Zip)

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

Mark Wells

(Name of Person)

at ( 316 ) 663-9193 x160  
(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 Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

October 17, 1995

**MARK A. WELLS**  
**MID-AMERICA POINT OF SALE, INC.**  
**PO BOX 1688**  
**HUTCHINSON, KS 67504-1688**

**SUBJECT: MID-AMERICA POINT OF SALE, INC.**  
**Ref. Number: W95000020670**

We have received your document for MID-AMERICA POINT OF SALE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$2,400.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers  
Document Examiner

Letter Number: 095A00046794



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

January 11, 1996

**MARK A. WELLS**  
**MID-AMERICA POINT OF SALE, INC.**  
**PO BOX 1688**  
**HUTCHINSON, KS 67504-1688**

**SUBJECT: MID-AMERICA POINT OF SALE, INC.**  
**Ref. Number: W95000020670**

This letter is in response to the application by foreign corporation for authorization to transact business in Florida that was previously submitted to this office for MID-AMERICA POINT OF SALE, INC..

The referenced application states that the corporation has transacted business in the State of Florida since January 1, 1993. You were notified by letter dated October 17, 1995, that because of failure to obtain a certificate of authority prior to transacting business in the State of Florida, the corporation is liable for \$2400.00 in appropriate fees and penalties as set forth in Section 607.1502(4), Florida Statutes, (copy enclosed).

Until a response is received by this office concerning the prior notification, the application by foreign corporation for authorization to transact business in Florida will not be processed. If erroneous information was reflected on the previously submitted application, a sworn affidavit may be filed stating the correct date the corporation first transacted business in Florida, that the corporation did not transact business in Florida prior to the application filing year and that the information entered on such application is incorrect. Any such affidavit will be included with your original qualification documents.

Please provide your response to this letter within 30 days to avoid the necessity of further action.

If you have further questions concerning the filing of your document, please telephone the Foreign Qualification/Tax Lien Section at (904) 487-6091.

Lee Rivers  
Document Examiner      Letter No. 396A00001434

Enclosure



15 North Adams  
P.O. Box 1688  
Hutchinson, Kansas 67504-1688  
Voice: (316) 662-7700  
Fax: (316) 665-0793

February 15, 1996

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314  
Attn.: Lee Rivers

Dear Mr. Rivers:

Please find enclosed a check for \$2400.00 for the payment of fees and penalties relating to the filing of an application by Mid America Point of Sale, Inc. to transact business in Florida. Please note that we were not aware of these filing requirements until receiving an application sent to us by your office.

We have attempted to research whether the activities conducted by Mid America Point of Sale are considered as doing business in the State of Florida and thus subject to registration. We have not been able to make a definitive determination of this. However, we have decided to comply with the foreign corporation registration requirements until such time we conclude this is no longer necessary. We will promptly notified your office of any change.

Please contact me at (316) 663-9193 ext. 160 should you have any questions or need additional information.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mark A. Wells", is written over a horizontal line.

Mark A. Wells, Treasurer

**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:**

1. MID-AMERICA Point of Sale, 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. KANSAS  
(State or country under the law of which it is incorporated)

3. 48-1058010  
(FBI number, if applicable)

4. 7/8/88  
(Date of Incorporation)

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

6. 1993. Mail order business only  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.133, F.S.))

7. PO Box 1688 Hutchinson, KS 67504  
(Current mailing address)

8. SALE of computer point of sale systems  
(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: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CT Corporation

Office Address: 1200 S. Pine Island Rd.

Plantation

, Florida, 33324  
(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.*

(See Attached)

(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.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 FEB 19 AM 11:43

## ACCEPTANCE OF APPOINTMENT

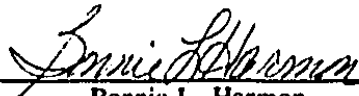
RE: MID AMERICA POINT OF SALE (Kansas Domestic)

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: September 26, 1995

C T CORPORATION SYSTEM

By

  
Bonnie L. Harmon,  
Assistant Secretary

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
SEP 29 11:43

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: William L. Mason

Address: 310 W 19<sup>th</sup> Hutchinson, KS 67502

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: (same as above)

Address: \_\_\_\_\_

Director: Lawrence Smith

Address: 15 N. Adams

Hutchinson, KS. 67501

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Lawrence Smith

Address: 15 N Adams

Hutchinson, KS 67501

Vice President: S. Glen Menefee

Address: 4511 N. Pine Oak

Hutchinson, KS 67502

Secretary: Margaret Thomas

Address: 110 E. 16<sup>th</sup>

Hutchinson, KS 67501

Treasurer: Mark A. Wells

Address: 6 Whitmore Hutchinson, KS 67502

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. Mark A. Wells, Treasurer  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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# STATE OF KANSAS

OFFICE OF  
SECRETARY OF STATE  
RON THORNBURGH



To all to whom these presents shall come, Greetings

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to corporations and that I am the proper official to execute this certificate.

I FURTHER CERTIFY THAT

MID-AMERICA POINT OF SALE, INC.

is a regularly and properly organized corporation under the laws of the state of KANSAS, having been incorporated in Kansas on the 8th day of July, A.D. 1988 and has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State.

In testimony whereof:  
I hereto set my hand and cause  
to be affixed my official seal.  
Done at the City of Topeka, this  
11th day of October, A.D. 1995



RON THORNBURGH  
SECRETARY OF STATE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
FEB 19 AM 11:43

**Mid  
America  
Point of  
Sale, Inc.**

15 North Adams  
P.O. Box 1688  
Hutchinson, Kansas 67504-1688  
Voice: (316) 662-7700  
Fax: (316) 665-0793

2/22/96

LEE:

HERE IS A CHECK FOR THE BALANCE DUE  
ON THE FEE/PENALTY AMOUNT OF 2400<sup>00</sup>

THIS ADDITIONAL AMOUNT IS DUE TO THE  
FACT THE "WRITTEN" AMOUNT ON THE FIRST  
CHECK WAS INCORRECTLY WRITTEN FOR 24<sup>00</sup>  
& NOT FOR 2400<sup>00</sup>.

*Mark D. Wells*