TROOOOO 5704

TRANSMITTAL LETTER

To:

Qualification/Tax Lien Section

Division of Corporations

SUBJECT: CUNNINGHAM MARKETING FIELD SERVICE 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:

SHARON BURT- CONTROLLER		
(Name of Person)	— —	Marin -
CUNNINGHAM MARKETING FIELD SERVICE INC (Firm/Company)	LAH.	98 00 11
770 W. GRANADA BLVD SUITE 300	ASSE	N [
(Address)	—ित्र —ार्	
ORMOND BEACH, FL 32174	STAT LORI	
(City/State/Zip)	PAG.	တ

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

*****78.75

CHRISTINE

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section 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

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.	CUNNINGHAM MARKETING FIELD SERVICE 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.	OKLAHOMA (State or country under the law of which it is incorporated) 3. 73-1316596 (FEI number, if applicable)
	OKLAHOMA (State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of incorporation) 5. PERPETUAL — (Duration: Year corp. will cease to exist or "perpetual")
6.	l-(-98 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	770 W. GRANADA BLUD, SUITE 300
:	ORMOND BEACH FL 32174
	ORMOND BEACH, FL 32174 (Current mailing address)
8.	MARKET RESEARCH
٠.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: PAUL D. CUNNINGHAM ARR CI ARREST 770 W. GRANANA BIVIN SUIFFRAN
	Haite
Of	fice Address: 770 W. GRANADA BLUD, SUITE 300
	ORMOND BEACH , Florida, 32174 (Zip code)
	(Zip code)
10	Registered agent's acceptance:
Ha	wing been named as registered agent and to accept service of process for the above stated corporation at the place designated
en i coi	this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with
an.	l accept the obligations of my position as registered again.
	(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. Name	es and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT accept	table)
A. DIRE	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman	=	
Address:		
Vice Chai	rman;	
Address:		
Director:		
Address:		98 0CT
Director:		TASSEE.
Address:		GFA -
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)	一
President:	ROBERTA CUNNINGHAM	
Address: _	400 WINWOOD PL, DEMOND BEACH, FL 32174	
Vice Presid	dent: W. PAUL CUNNINGHAM	
	400 WINWOOD PL, DEMOND BEACH, FL: 32174	
Secretary:	W. PAUL CUNNINGHAM	
Address: _	400 WINWOOD PC, DRMOND BEACH, FC - 32174	
- Treasurer:		
Address: _		
NOTE: 16	pecessary, you may attach an addendum to the application listing additional officers and/or Obefore (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	
14. RO	OBERTA CUNNINGITAM - PRESIDENT	iication)
·· <u> · · · · · · · · · · · · · · · · ·</u>	(Typed or printed name and capacity of person signing application)	

