

# F99000001290

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: INTEGRITY MANAGEMENT SERVICES, 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: **100002775741--7**

Sara Irons

(Name of Person)

INTEGRITY MANAGEMENT SERVICES, INC.

(Firm/Company)

P.O. BOX 976

(Address)

NIPOMO, CA 93444

(City/State/Zip)

-02/15/99--01121--005  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

Sara Irons at ( 805 ) 481-6310

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAR -9 AM 11:54

FILED

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

February 15, 1999

SARA IRONS  
INTEGRITY MANAGEMENT SERVICES, INC.  
P.O. BOX 976  
NIPOMO, CA 93444

SUBJECT: INTEGRITY MANAGEMENT SERVICES, INC.  
Ref. Number: W99000003820

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for INTEGRITY MANAGEMENT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt  
Document Specialist

Letter Number: 999A00006729

# RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned RAUL H. TORRES, do hereby certify  
(Name)

that this Resolution of the Board of Directors of

INTEGRITY MANAGEMENT SERVICES INC  
(Corporate Name)

a corporation duly organized and existing under the laws of the State of OKLAHOMA,

was duly adopted on FEBRUARY 25, 19 99.

Be it resolved, that INTEGRITY MANAGEMENT SERVICES INC,  
(Corporate Name)

organized and existing in the State of OKLAHOMA, hereby adopts the name

INTEGRITY MANAGEMENT HOUSEKEEPING SERVICES for use in Florida.

Dated: 2/25/99

Raul H. Torres  
Signature of either Chairman, Vice Chairman or any officer

RAUL H. TORRES  
Type or print name

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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. INTEGRITY MANAGEMENT SERVICES, 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. OK 3. 73-1457500  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9-1-94 5. indefinite  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 1-1-99  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. P.O. BOX 976  
NIPOMO, CA 93444  
(Current mailing address)

8. janitorial services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

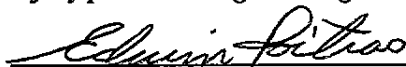
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: ED POITRAS

Office Address: TYNDALL AFB  
325 MEDICAL GROUP  
340 MAGNOLIA CIRCLE, BLDG 1468  
TYNDALL AFB, Florida, 32403  
(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: RAUL H TORRES JR

Address: 1089 MESA VIEW DRIVE  
ARROYO GRANDE, CA 93420

Vice Chairman: same

Address:

Director: same

Address:

Director:

Address:

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

President: RAUL H TORRES JR

Address: 1089 MESA VIEW DRIVE  
ARROYO GRANDE, CA 93420

Vice President: same

Address:

Secretary: same

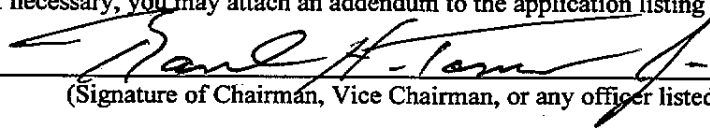
Address:

Treasurer: same

Address:

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TALLAHASSEE, FLORIDA

**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. RAUL H TORRES JR. PRESIDENT  
(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING  
DOMESTIC CORPORATION

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FILED  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

*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 corporations to transact business in this state and am the proper officer to execute this certificate.*

*I FURTHER CERTIFY that INTEGRITY MANAGEMENT SERVICES, INC. whose registered agent is Burgess And Burgess, Inc., with its registered office at 601 C Ave, Suite 201, Lawton, Oklahoma is a corporation 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 corporation's financial condition or business activities and practices. Such information is not available from this office.*



*IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Oklahoma at the City of Oklahoma City, this*

*23rd day of November, 1998*

*Sam Cole*

Secretary of State

By: *M. Tannehill*