

Document Number Only

F99000006168

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

700003056567--8

-11/30/99--01029--018

*****70.00 *****70.00

CORPORATION(S) NAME

NC FE. Com, Inc.

99 NOV 30 PM 4:02

STATE OF FLORIDA
DIVISION OF CORPORATIONS

- ☒ 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 E.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.F. Verifier

11-30

PLEASE RETURN EXTRA COPY(S)

FILED

CHRISTOPHER

RECEIVED

NOV 30 AM 11:13

B/K

11/30/99

**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.

NCFE. COM, INC.

1. _____
(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.)

DELAWARE

65-0959326

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/22/99 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. When application is accepted.
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 18501 MURDOCK CIRCLE, PORT CHARLOTTE, FL

(Current mailing address)

8. FINANCIAL AND BUSINESS 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: CT CORP SYSTEMS

Office Address: 1200 S. PINE ISLAND ROAD

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.

Susan J. Metz
(Registered agent's signature)

Susan J. Metz
Assistant Secretary

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: (Street address ONLY - P.O. Box NOT acceptable)

FILED
STATE
SECRETARY OF CORPORATIONS
99 NOV 30 PM 4:02

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

Chairman: Lance K. Poulsen

Address: 6125 Memorial Drive

Dublin, OH 43017

Vice Chairman: _____

Address: _____

Director: Rebecca S. Parrett

Address: 6125 Memorial Drive

Dublin, OH 43017

Director: Donald H. Ayers

Address: 6125 Memorial Drive

Dublin, OH 43017

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

President: Rebecca S. Parrett

Address: 6125 Memorial Drive

Dublin, OH 43017

Vice President: Donald H. Ayers

Address: 6125 Memorial Drive

Dublin, OH 43017

Secretary: Donald H. Ayers

Address: 6125 Memorial Drive

Dublin, OH 43017

Treasurer: Rebecca S. Parrett

Address: 6125 Memorial Drive

Dublin, OH 43017

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. _____

Lance K. Poulsen

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

FILED
STATE OF OHIO
CORPORATIONS
DIVISION
NOV 30 PM 4:02
2019

State of Delaware
Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NCFE.COM, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF NOVEMBER, A.D. 1999.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 NOV 30 PM 4:02





Edward J. Freel, Secretary of State

3115296 8300

991494153

AUTHENTICATION: 0091471

DATE: 11-18-99