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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (800) 345-4647
Fax Number : (800) 432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
ENCORE SCIENTIFIC, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

*****PLEASE GIVE THE ORIGINAL SUBMISSION
DATE AS THE FILE DATE - 6/26/17*******

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JUN 28 2017

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2017 JUN 26 A 10:38

TALLAHASSEE, FLORIDA

RECEIVED

2017 JUN 27 09:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



June 27, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAPITOL SERVICES, INC

SUBJECT: ENCORE SCIENTIFIC, LLC
REF: W17000053194

******PLEASE GIVE THE ORIGINALLY SUBMISSION
DATE AS THE FILE DATE - 6/26/17******

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX And. #: H17000169184
Letter Number: 717A00012960

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENCORE SCIENTIFIC, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jane Henson

Name of Person

McAfee & Taft A Professional Corporation

Firm/Company

10th Fl., Two Leadership Square, 211 N. Robinson

Address

Oklahoma City, Oklahoma 73102

City/State and Zip Code

stephen.hetrick@mcafeetaft.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jane Henson

at (405)

552-2362

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Encoore Scientific, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 47-5580636
(FID number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0901 & 605.0903, F.S. to determine penalty liability))
5. 801 West New Orleans Street
(Street Address of Principal Office)
Broken Arrow, Oklahoma 74011
6. 801 West New Orleans Street
(Mailing Address)
Broken Arrow, Oklahoma 74011

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: OT Corporation System

Office Address: 1200 S. Pine Island Rd. #250

Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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 further with and accept the obligations of my position as registered agent.

X James Halpin
(Signature of Registered Agent) Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity	Name and Address	Title or Capacity	Name and Address
Manager	<u>Jacob G. Jackson</u> <u>801 West New Orleans St.</u> <u>Broken Arrow, OK 74011</u>		
Manager	<u>Kasey D. Jackson</u> <u>801 West New Orleans St.</u> <u>Broken Arrow, OK 74011</u>		

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.153, F.S.

Kasey D. Jackson
(Signature of an authorized person)

Kasey D. Jackson

Typed or printed name of signat

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENCORE SCIENTIFIC, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5877430 8300

SR# 20173086087

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202486177

Date: 05-04-17