# M18000006145

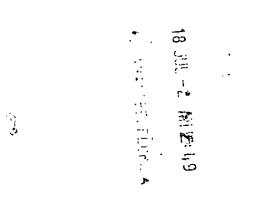
(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(======================================		
(Document Number)		
(Sacarient (Manager)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		





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JUL 03 2018



June 21, 2018

REBECCA REYNOLDS 4333 W 21ST STREET TULSA, OK 74107 US

SUBJECT: TCI SERVICES, LLC Ref. Number: W18000057885

We have received your document for TCI SERVICES, LLC and your check(s) totaling \$165.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Judy A Leggett Regulatory Specialist II Registration Section

1

Letter Number: 118A00012981

### COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: TOT Service Name of	Limited Liability Company
	pany for Authorization to Transact Business in Florida." Certificate of enced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the	following:
Rebecca R	eynolds James of Person
TCI Service	
<u>4333 W. 21</u>	St Street Address
Tulsa, Olclaho	ma 74107 State and Zip Code
Vreynolds @ E-mail address: (to be use	tank-consultants.com
For further information concerning this matter, please call:	
Sarah Branson Name of Contact Person	_at ( <u>918</u> ) <u>583 · 3968</u> 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:  \$\Begin{align*} \Boxed{\text{S130.00 Filing Fee}} & Certificate of Status \end{align*}	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE F COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	FOLLOWING IS SUBMITTED TO REGIS.	IERA FOREIGN LIMITED LIABILITY
(Name of Foreign Limited Liability Company, most include "Limited Liability Company, most include "Liability	ted Liability Company," "L.L.C.," or "LLC."	)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in the control of the purpose of transacting business in the control of the cont	forids. The alternate name must include "Limited Lie 3. 90-000 (Fill man	ability Company," "L.U.C," or "U.U.C.")  Style="border-right: 15px;" of applicable)
6. (Date first transacted business in Florida, if prior to (See sections 605,090) & 605,0905, F.S. to determ the first parameter of Frincipal Office)	o registration.) nine penalty habdity)  6. 4333 M. 215	+ Street
Tuisa, Uklanoma 1410 1	Tulsa, Mclahi	14107
7. Name and street address of Florida registered agent: (P.O. Box	_	
Name: <u>Corporation Servi</u>		
Office Address: 1201 Hays Street		
Tallahassee	, Florida _ 3230	≥/
Registered agent's acceptance: Having been named as registered agent and to accept service of designated in this application, I hereby accept the appointment at to comply with the provisions of all statutes relative to the proper and accept the obligations of my position as registered agent.  (Registered agent's	is registered agent and agree to act r and complete performance of my	in this capacity. I further agree
8. The name, title or capacity and address of the person(s) who he Title or Capacity:  Name and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:
Sr. Vice President Kevin Kupitz 9821 Two berry Trail Crystal Lake, IL 60014		. 35
V.P. of Engineering Kah-Kan Chan 5929 E. 110m Pl. Twise, DK 74137		F.0
(Use attachments if necessary)	•	<u> </u>
9. Attached is a certificate of existence, no more than 90 days old, jurisdiction under the law of which it is organized. (If the certificate of the translator must be submitted)		
10. This document is executed in accordance with section 605.0203 submitted in a document to the Department of State constitutes a thi   Kan-Kan Ch  Typed or	(1) (b), Florida Statutes. I am award degree felony as provided for in s	e that any false information .817.155, F.S.

#### OFFICE OF THE SECRETARY OF STATE



## CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

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 certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>TCI SERVICES, LLC</u> whose registered agent is <u>CORPORATION SERVICE COMPANY</u>, with its registered office at <u>10300 GREENBRIAR PLACE\_OKLAHOMA CITY 73159 7653 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> 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 entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>23rd</u>, day of <u>May</u>, <u>2018</u>.

Secretary Of State