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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TYONEK SERVICES GROUP
(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:

Sally Clampitt
(Name of Person)

Tyonek Services Group, Inc.
(Firm/Company)

1689 C Street, #219
(Address)

Anchorage, AK 99501-5131
(City/State and Zip code)

For further information concerning this matter, please call:

Sally Clampitt at (907) 272-0707
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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

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. Tyonek Services Group, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alaska 3. 20-1603684
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 30, 2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1689 C Street, #219, Anchorage, Alaska 99501-5131
(Principal office address)

1689 C Street, #219, Anchorage, Alaska 99501-5131
(Current mailing address)

8. Holding company / management
(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 NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Rd

Plantation, Florida 33324
(City) (Zip code)

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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.

Please see attached.
(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.

FLORIDA

CONSENT TO SERVE AS REGISTERED AGENT

CT Corporation System having been designated to act as Registered Agent
Hereby agrees to act in this capacity for the following Corporation: Tyonek
Services Group Inc.

CT CORPORATION SYSTEM


Kathleen C. Gariepy, Asst. Sec.

Date: 11/13/2006

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Bart K. Garber

Address: P.O. Box 1091
Loxahatchee, FL 33470-1091

Vice Chairman: _____

Address: _____

Director: Scott Pfeifer

Address: 1689 C Street, #219
Anchorage, AK 99501-5131

Director: Lenn A. Doran

Address: 1689 C Street, #219
Anchorage, AK 99501-5131

B. OFFICERS

President: Bart K. Garber

Address: P.O. Box 1091
Loxahatchee, FL 33470-1091

Vice President: Scott Pfeifer

Address: 1689 C Street, #210
Anchorage, AK 99501-5131

Secretary: Lenn A. Doran

Address: 1689 C Street, #219, Anchorage, AK 99501-5131

Treasurer: Lenn A. Doran

Address: 1689 C Street, #219, Anchorage, AK 99501-5131

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Director or Officer listed in number 12 of the application)

14. Lenn A. Doran, Secretary-Treasurer
(Typed or printed name and capacity of person signing application)

Alaska Entity # 88400D

State of Alaska
Department of Commerce, Community, and Economic
Development

CERTIFICATE
OF
GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

TYONEK SERVICES GROUP, INC.

on the 30th day of August, 2004 filed in this office its Articles of Incorporation, as a Business Corporation organized under the laws of this state.

I FURTHER CERTIFY that said Business Corporation is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 17th day of November, 2006.

A handwritten signature in black ink, appearing to read "William C. Noll".

William C. Noll
Commissioner

Certification Number: 155944-3

Verify this certificate online at <https://myalaska.state.ak.us/business/soskb/verify.asp>