# F400000872

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

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### FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/26/14

NAME:

HECKMANN PAINTING, INC

TYPE OF FILING: APPLICATION

COST:

78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Heckmann Painting, 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," or "Certificate of Good Standing" 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:
Capitol Services Corporate Filings Team
Name of Person
Capitol Services, Inc.
Firm/Company .
800 Brazos, Suite 400
Address
Austin, TX 78701
City/State and Zip code
Mach637@aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Micah Caudle at ( 800 ) 345-4647 Ext: 322
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 \$\sum_{\text{Certificate of Status}}\square \square \text{\$78.75 Filing Fee & Certified Copy} \square \text{\$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.

l.	, <u>Heckmann Pair</u>	nting, Inc			_	
		poration; must include "INCORPORATIO," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
	(If name unavailabl	e in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)	)	
2.	Missouri		3.	43-1608391		
(State or country under the law of which it is incorporated)				(FEI number, if applicable)		
4.	April 13, 1992	• •	5.	Perpetual		
	(Date of	incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	_	
6.						
		(Date first transacted busines	ss i	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_	
7.	637 N Bompa	art Ave St Louis, MO 631	19	)		
٠٠,	·	(Principal office				
	637 N Bomp	oart Ave. St Louis, MO 6	33	119		
	<u> </u>	(Current mailing	add	ress)	_	
8.	Hotel Renov	vation		SEORI NLLA	Er-kryp:	
	(Purpose(s) o	of corporation authorized in home state o	rcc	ountry to be carried out in state of Florida)	—	
9.	. Name and street a	address of Florida registered agent: (	P.C			
	Name:	Capitol Corporate Services	<u>, l</u>	<u>nc.</u> မြွေး	(	
0	office Address:	155 Office Plaza Dr Ste A		NOA O		
		Tallahassee		Florida <u>32301</u> (Zip code)		
		(City)		(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.

Coayle Wundle Gayle Windle, Assistant Secretary on behalf of Capitol Corporate Services, Inc.

(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.

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

# STATE OF MISSOURI



#### Jason Kander Secretary of State

# CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

## HECKMANN PAINTING, INC. 00365190

was created under the laws of this State on the 13th day of April, 1992, and is in good stand having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 24th day of February, 2014

Scoretary of State

Certification Number: 15919892-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp