

F15000003463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

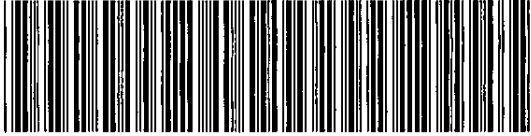
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
*WIS-40514*

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06/08/15--01023--009 \*\*87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED

*[Handwritten mark]*

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Alpine Testing Solutions, 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:

**Becky Hegerhorst**

Name of Person

**Alpine Testing Solutions, Inc.**

Firm/Company

**51 W. Center #514**

Address

**Orem, UT 84057**

City/State and Zip code

**becky.hegerhorst@alpinetesting.com**

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

For further information concerning this matter, please call:

**Becky Hegerhorst**

Name of Person

at ( **801** ) **756-1919**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 15, 2015

BECKY HEGERHORST  
51 W. CENTER #514  
OREM, UT 84057

SUBJECT: ALPINE TESTING SOLUTIONS, INC.  
Ref. Number: W15000040514

We have received your document for ALPINE TESTING SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 115A00012204

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

APPROVED AND FILED

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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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Alpine Testing Solutions, 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. Utah

(State or country under the law of which it is incorporated)

3. 87-0497892

(FEL number, if applicable)

4. 4/8/1991

(Date of incorporation)

5. perpetual

(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. 1433 Settlement Drive, Park City, UT 84098

(Principal office address)

51 W. Center #514, Orem, UT 84057

(Current mailing address)

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

Name: Torrey Smith

Office Address: 231 Cocobolo Drive

Santa Rosa Beach

(City)

, Florida 32459

(Zip code)

9. 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.*

(Registered agent's signature)

10. 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.

APPROVAL  
AND  
FILED

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

15 AUG -3 PM 4: 21

**A. DIRECTORS**

Chairman: Kate Mead

Address: 2 Lakeshore Dr.

Columbus, NE 68601

Vice Chairman: Mike Hill

Address: 1874 S. 180 W.

Orem, UT 84058

Director: Kerri Lewis-Morrill

Address: 47 Orange Blossom Circle

Ladera Ranch, CA 92694

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Brian Adams

Address: 1433 Settlement Drive

Park City, UT 84098

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Kerri Lewis-Morrill

Address: 47 Orange Blossom Circle, Ladera Ranch, CA 92694

Treasurer: Darrin Arlt

Address: 1737 E. Briar Glen Ln., Sandy, UT 84092

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Brian Adams - President/CEO

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Utah Department of Commerce  
Division of Corporations & Commercial Code  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07/28/2015  
1115550-014207282015-2577024

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## CERTIFICATE OF EXISTENCE

**Registration Number:** 1115550-0142  
**Business Name:** ALPINE TESTING SOLUTIONS, INC.  
**Registered Date:** April 08, 1991  
**Entity Type:** Corporation - Domestic - Profit  
**Current Status:** Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code