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(Req	uestor's Name))					
(Address)							
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(City/	State/Zip/Phor	ne #)					
PICK-UP	Mait	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificate	es of Status					
Special Instructions to Filing Officer:							

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S. PRATHER

COVER LETTER

то:	O: Registration Section Division of Corporations							
SUBJE	ECT:	Andale C	Construction, Inc.					
			*******	of corporati	on - mu	st include suffix		
Dear Si	ir or Ma	adam:						
"Certifi	icate of	Existenc		e of Good S	tanding [*]	and check are sub	ct Business in Florida," omitted to register the	
Please i	return a	ill corresp	ondence concerr	ing this mat	ter to th	e following:		
Shelby (Camp							
	·	,		Name	of Perso	n		
Andale (Construc	tion, Inc.						
				Firm/C	ompany			
3170 N	. Ohio S	St.					 _	
				Ad	dress			
Wichita	a, KS 6	7219	 .					
				City/State	and Zij	p code		
shelby	andale	construct		s. (to be use	d for ful	ture annual report i	notification)	
						are annual report	ionneadon)	
For furt	ther inf	ormation	concerning this r	natter, pleas	e call:			
Shelby Camp at (316			\ 8) 832-0063				
Name of Person		n		Area Code Daytime Telephone		hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclose	ed is a c	heck for	the following am	ount:				
7 \$70.	.00 Fili	ng Fee	☐ \$78.75 Filir Certificate	_		.75 Filing Fee & tified Copy	☐ \$87.50 Filing Fee, Certificate of Status &	

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 Andale Construction, 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 it Kansas 3. (State or country under the law of which it is incorporated) (FEI number, if applicable) 09/30/2011 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 3170 N. Ohio St., Wichita, KS 67219 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent, LLC. Name: 3030 N. Rocky Point Dr. STE 150A Office Address: Tampa

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.



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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ___ Vice Chairman: __ Address: _ Director: Janelle Molitor Address: 442 Sevy Andale, KS 67001 Director: _ B. OFFICERS President: Peter J. Molitor Address: 442 Sevy Andale, KS 67001 Vice President: Richard Mfuko Address: 1465 S Shiloh Ct. Wichita, KS 67207 Secretary: Shawn Thimesch Address: 4320 N. Ridgeport, Wichita, KS 67205 Treasurer: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. Peter J. Molitor, President

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 4549960

Entity Name: ANDALE CONSTRUCTION, INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: Peter J Molitor

Registered Office: 3170 N Ohio Street, WICHITA, KS 67219

was filed in this office on September 30, 2011, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 05, 2018

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 1082320 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.