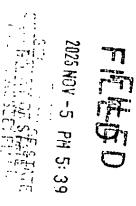
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W24000144231				



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10/10/24--01019--005 **87.50



Office Use Only

11-05-24

COVER LETTER

_	stration Section ion of Corporations				
SUBJECT:	Burk-Kleinpeter, Inc.				
ochonici.		of corporation	- must i	nclude suffix	
Dear Sir or M	íadam:				
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to to	of Good Stan	ding" an	d check are subm	
Please return	all correspondence concerni	ng this matter	to the fo	ollowing:	
Deborah Vegh					
		Name of	Person		
Burk-Kleinpete	er, Inc.				
		Firm/Com	ıpany		
2400 Veterans	Memorial Blvd. Suite 310				
		Addre	ess	·	
Kenner, LA 70	0062				
		City/State a	nd Zip c	ode	
dvegh@bkiusa	com				
	E-mail address	: (to be used f	or future	annual report no	tification)
For further in	formation concerning this m	atter, please c	all:		
Deborah Vegh		504	486-	5901	
Nam	e of Person	Area Code	e	Daytime Telepho	one Number
Regis Divis The C 2415	EET/COURIER ADDRES tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303			MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	check for the following amoveck payable to: FLORIDA DI ing Fee	EPARTMENT g Fee &	\$78.75	TE Filing Fee & ed Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

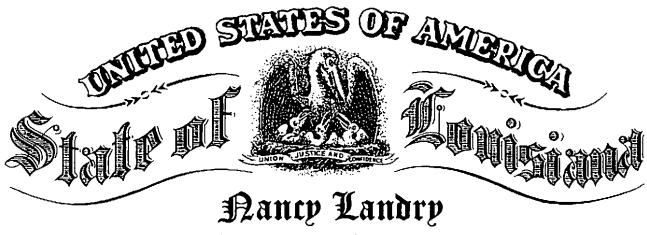
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	corporation; must include "INCORPO corp," "Inc," "Co," or "Corp.")	RATED,	"COMPANY," "CORPORATION,"	
	• , , • • ,			
(If name unavail	able in Florida, enter alternate corpor	rate name a	adopted for the purpose of transacting business in Flo	rida)
LA		3	72-1175112	
	ry under the law of which it is incorpo	orated)	(FEI number, if applicable)	
10/1/1910		5.	perpenial	
(Date	of incorporation)		(Date of duration, if other than perpetual)	
	•			
			Florida, if prior to registration)	
	(SEE SECTIONS 607.1501	& 607.15	02, F.S., to determine penalty liability)	
2400 Veterans	Memorial Blvd., Suite 310, Kenner, I	LA 70062		
	(Priz	ncipal offic	ce <u>street</u> address)	
2400 1/				
2400 Veterans	Memorial Blvd., Suite 310, Kenner, L.			
2400 Veterans			g address, if different)	
2400 Veterans			g address, if different)	
		ent mailing		
Name and stre	(Curr	ent mailing		
Name and <u>stre</u> Name:	(Current address of Florida registered age Fares Tannous	ent mailing		202
Name and stre	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive	ent mailing		2025 NO
Name and <u>stre</u> Name:	(Current address of Florida registered agr Fares Tannous 12271 Sunchase Drive Jacksonville	ent mailing		2025 NOV -
Name and <u>stre</u> Name:	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive	ent mailing	. Box NOT acceptable)	2025 NOV -5
Name and <u>stre</u> Name: fice Address:	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City)	ent mailing	Box NOT acceptable) Florida 32246	2025 NOV -5 PM
Name and stre Name: fice Address: Registered agreeing been name	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: ded as registered agent and to acceptance agent and to acceptance.	ent mailing	Box NOT acceptable) Florida 32246 (Zip code) The of process for the above stated corporation at	2025 NOV -5 PM 5
Name and stre Name: fice Address: Registered agring been namesignated in this	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: and as registered agent and to acceptance application, I hereby accept the	ent mailing ent: (P.O	Box NOT acceptable) , Florida 32246, Florida (Zip code) te of process for the above stated corporation at ent as registered agent and agree to act in this	<u>ļci</u>
Name and stree Name: fice Address: Registered againg been names signated in this other agree to compare the com	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: seed as registered agent and to accept application, I hereby accept the comply with the provisions of all seeds.	ent mailing ent: (P.O ept servic appointm	Box NOT acceptable) Florida 32246 (Zip code) e of process for the above stated corporation at ent as registered agent and agree to act in this clative to the proper and complete performances	<u>ļci</u>
Name and stree Name: fice Address: Registered againg been names signated in this other agree to compare the com	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: and as registered agent and to acceptance application, I hereby accept the	ent mailing ent: (P.O ept servic appointm	Box NOT acceptable) Florida 32246 (Zip code) e of process for the above stated corporation at ent as registered agent and agree to act in this clative to the proper and complete performances	``\ {ci
Name and stree Name: fice Address: Registered againg been names signated in this other agree to compare the com	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: seed as registered agent and to accept application, I hereby accept the comply with the provisions of all seeds.	ent mailing ent: (P.O ept servic appointm	Box NOT acceptable) Florida 32246 (Zip code) e of process for the above stated corporation at ent as registered agent and agree to act in this clative to the proper and complete performances	<u>ļci</u>
Name and stree Name: fice Address: Registered againg been names signated in this other agree to compare the com	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: seed as registered agent and to accept application, I hereby accept the comply with the provisions of all seeds.	ent mailing ent: (P.O ept servic appointm	Box NOT acceptable) Florida 32246 (Zip code) e of process for the above stated corporation at ent as registered agent and agree to act in this clative to the proper and complete performances	ţci
Name and stree Name: fice Address: Registered againg been names signated in this other agree to compare the com	(Current address of Florida registered age Fares Tannous 12271 Sunchase Drive Jacksonville (City) ent's acceptance: seed as registered agent and to accept application, I hereby accept the comply with the provisions of all seeds.	ent mailing ent: (P.O ent: (P.O appointm statutes re of my pos	Box NOT acceptable) , Florida \(\frac{32246}{\text{(Zip code)}} \) te of process for the above stated corporation at ent as registered agent and agree to act in this plative to the proper and complete performances ition as registered agent.	·: {c

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.

A the little industry and are the same of the and address of the advance officer and for dimense for the the sec

A. DIRECTORS					
Chairman	Michael Chopin Name:	□Chairman	Name: Bruce Badon		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	2400 Veterans Memorial Blvd, Suite 310	□Director	2400 Veterans Memorial Blvd, Suite 310		
President	Kenner, LA 70062	□President	Kenner LA 70062		
□Vice President		□Vice President			
□Secretary	☐Treasurer	Secretary	□Treasurer		
Other	Other	Other	Other		
□ Chairman	Name	□ Chairman	None		
	Name:		Name:		
	Address:	□Vice Chairman	Address:		
Director		□Director			
□President		□President			
□Vice President		□Vice President			
Secretary	Treasurer	☐ Secretary	□Treasurer		
Other	Other	Other			
□ Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director		Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other	□Other	Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.					
13	(Typed or printed name and capacity of po	+ CEO erson signing application)		



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

BURK-KLEINPETER, INC.

Domiciled at KENNER, LOUISIANA,

Was filed in this Office and a Certificate of Incorporation was issued on October 01, 1990.

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on.

October 2, 2024

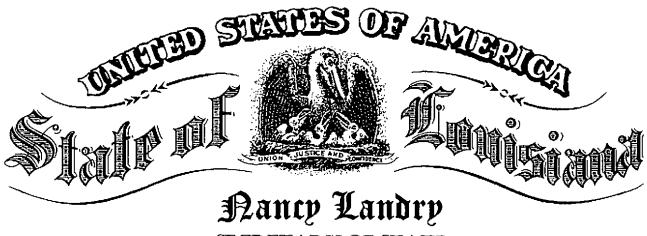
Certificate ID: 11941082#YNJ62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State
Web 34364706D

2000 tof to - 10/2/2004 4:40:40 DM



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

BURK-KLEINPETER, INC.

A corporation domiciled in KENNER, LOUISIANA,

Filed charter and qualified to do business in this State on October 01, 1990,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

October 2, 2024

Web 34364706E



Certificate ID: 11941083#8QK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

COVER LETTER

	gistration Section vision of Corporations			
SUBJEC	T: Burk-Kleinpeter, Inc.			
5014150	Name of corp	oration - mus	t include suffix	
Dear Sir o	Madam:			
"Certificat	ed "Application by Foreign Corporati e of Existence," or "Certificate of Goo renced foreign corporation to transact	od Standing"	and check are subm	
Please retu	rn all correspondence concerning this	matter to the	following:	
Deborah Vo	egh			
	Na	ime of Persoi	1	
Burk-Klein	peter, Inc.			
	Fir	m/Company		
2400 Vetera	nns Memorial Blvd. Suite 310			
		Address		
Kenner, LA	70062			
	City/	State and Zip	code	
dvegh@bki				
	E-mail address: (to be	used for futi	ure annual report no	tification)
For further	information concerning this matter, p	lease call:		
Deborah Ve	egh at (504 48	66-5901 Daytime Telepho	
N.	ame of Person Are	ca Code	Daytime Telepho	one Number
Re Di Th 24	gistration Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810 llahassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	s a check for the following amount: check payable to: FLORIDA DEPART Filing Fee	è □ \$78.	TATE 75 Filing Fee & ified 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.

Burk-Kleinpete			
(Enter name of o	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION	»; ;
(If name unavail	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
TΔ	,	72-1175112	
2	ry under the law of which it is incorporated)	(FEI number, if app	licable)
10/1/1910	·	perpetual	
4.	e of incorporation)	(Date of duration, if other th	nan perpetual)
_	,	•	
5		n Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability	y)
7. 2400 Veterans	s Memorial Blvd., Suite 310, Kenner, LA 70062		
· ·	(Principal off	ice street address)	
2400 Veterans	Memorial Blvd., Suite 310, Kenner, LA 70062		
	(Current mailir	ng address, if different)	
8. Name and stre	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	
Name:	Fares Tannous	<u> </u>	
Office Address:	12271 Sunchase Drive		. 2
Jinee Address.	Jacksonville		251
		, Florida	
	(City)	(Zip code)	
Registered ag	ent's acceptance:		
Having been nam	ned as registered agent and to accept servi	ce of process for the above stated	corporation a tile ace
lesignated in this	application, I hereby accept the appoints	nent as registereu agent ana agree	to act in any conferred.
urther agree to c	comply with the provisions of all statutes rewith and accept the obligations of my po	cianve to the proper and complete sition as registered agent.	m w
ina i um jamaia	A substitution of the subs		–
)	
	De Ma	/	
_	(Registered agent's s.	ignature)	
ت مئائد طومعه ۸ . ۱.۸	certificate of existence duly authenticated,		ivery of this application to
.u. Attached is a	ceruncate of existence duty authenticated,	not more man 30 days briot to der	trans or man approximent to

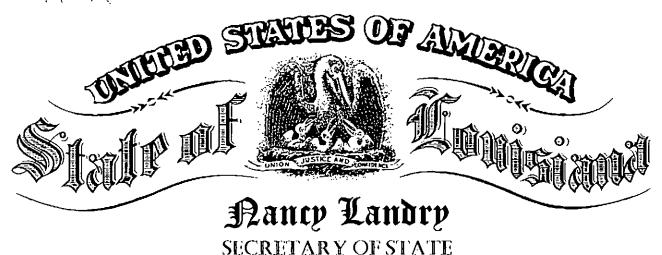
11. The initial industry acceptance the name of the and addresses af the natural affines and for discrete from the six (C) estable

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS	·				
Chairman	Name: Michael Chopin	□Chairman	Name: Bruce Badon		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	2400 Veterans Memorial Blvd, Suite 310	□Director	2400 Veterans Memorial Blvd, Suite 310		
President	Kenner, LA 70062	□President	Kenner ŁA 70062		
□ Vice President		□Vice President			
□Secretary	Treasurer	■ Secretary	□Treasurer		
Other	Other	□Other	□Other		
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman			
□Director		□Director			
□President		President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	Other	Other	Other		
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary	Treasurer		
□Other	Other	□Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.					
12.	Signature of Director of	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.					

Michael Chopin fresident + CEO
(Typed or printed name and capacity of person signing application)



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

BURK-KLEINPETER, INC.

Domiciled at KENNER, LOUISIANA,

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October 2, 2024

Certifica

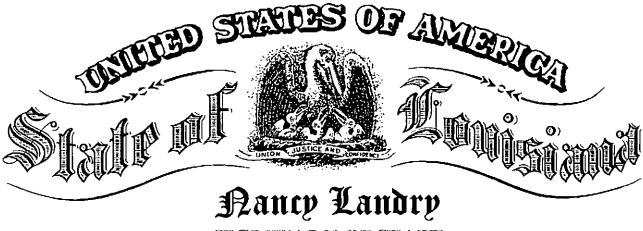
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Secretary of State

Web 34364706D



SECRETARY OF STATE

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A corporation domiciled in KENNER, LOUISIANA,

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October 2, 2024

Nancy fandry

Secretary of State
Web 34364706D



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