State of North Carolina
Department of the Secretary of State

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to §55-15-03 of the General Statutes of North Carolina, the undersigned corporation hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1. The name of the corporation is WXYZ Services, Inc. ; and if the corporate name is unavailable for use in the State of North Carolina, the name the corporation wishes to use is: WXYZ Services, Inc.

2. The state or country under whose laws the corporation was organized is: _____.

3. The date of incorporation was 01/01/2011 ; its period of duration is: PERPETUAL.

4. Principal office information: (*Select either a or b.*)

   a. ☑ The corporation has a principal office.

   The street address and county of the principal office of the corporation is:

   Number and Street 1234 Main Street

   City, State, Zip Code Charlotte, NC 28201 County Mecklenburg

   The mailing address, ***if different from the street address***, of the principal office of the corporation is:

   _____

   b. ☐ The corporation does not have a principal office.

5. The street address and county of the registered office in the State of North Carolina is:

   Number and Street 1234 Main Street

   City, State, Zip Code Charlotte, NC 28201 County Mecklenburg

6. The mailing address, ***if different from the street address,*** of the registered office in the State of North Carolina is:

   _____

7. The name of the registered agent in the State of North Carolina is: _____

8. The names, titles, and usual business addresses of the current officers of the corporation are (attach if necessary):

   Name ***Title*** ***Business Address***

   John Doe, President, 1234 Main Street, Charlotte, NC 28201

   Ann Doe, Vice President, 1234 Main Street, Charlotte, NC 28201

   _____

   _____

9. Attached is a Certificate of Existence (or document of similar import) duly authenticated by the Secretary of State or other official having custody of corporate records in the state or country of incorporation. ***The Certificate of Existence must be an original and less than six months old.***

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10. If the corporation is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its board of directors, certified by its secretary, adopting the fictitious name is attached.

11. This application will be effective upon filing, unless a delayed date and/or time is specified:_____

This is the 01 day of January , 20 11

WXYZ Services, Inc.
Name of Corporation

_____
Signature

John Doe, President
Type or Print Name and Title

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NOTES:
1. Filing fee is $250. This document must be filed with the Secretary of State.

Instructions for Filing

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Form B-09)

Item 1 Enter the complete name of the corporation exactly as it appears in the records of the appropriate official in the state or country of incorporation. If the name cannot be used in North Carolina, enter the name (including a corporate ending) that it wishes to use in North Carolina.

Item 2 Enter the state or country of incorporation.

Item 3 Enter the date of incorporation and the period of duration.

Item 4 Select item "a" if the corporation has a principal office. Enter the complete street address of the principal office and the county in which it is located. If mail is not delivered to the street address of the principal office or if you prefer to receive mail at a P.O. Box or Drawer, enter the complete mailing address of the principal office.

Select item "b" if the corporation does not have a principal office.

Item 5 Enter the complete street address of the corporation's registered office and the county in which it is located.

Item 6 Enter the complete mailing address of the corporation's registered agent, only if mail is not delivered to the street address above or if you prefer to receive mail at a P. O. Box or Drawer.

Item 7 Enter the name of the registered agent. The registered agent must be a North Carolina resident, an existing domestic business corporation, nonprofit corporation or limited liability company, or a foreign business corporation, nonprofit corporation or limited liability company authorized to transact business or conduct affairs in North Carolina.

Item 8 Enter the names, titles, and usual business address of the current officers of the corporation.

Item 9 See Form

Item 10 See Form

Item 11 The document will be effective on the date and at the time of filing, unless a delayed date or an effective time (on the date of filing) is specified. If a delayed effective date is specified without a time, it will be effective at 11:59:59 p.m. A delayed effective date may be specified up to and including the 90th day after the day of filing.

Date and Execution

Enter the date the document was executed.

In the blanks provided enter:

- The name of the corporation as it appears in Item 1
- The signature of the representative of the corporation executing the document (may be the chairman of the board of directors or any officer of the corporation).
- The name and title of the above-signed representative.

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