F020000060a1

| • | | | | | |
|------------------------------|---------------|-------------|--------|--|--|
| (Re | equestor's | Name) | | | |
| (Ac | ddress) | | | | |
| (Ac | ddress) | | | | |
| (Ci | ty/State/Zip | /Phone #) | - | | |
| PICK-UP | □ w | AIT | MAIL | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | Ce <u>r</u> t | ificates of | Status | | |
| Special Instructions to | Filing Offic | er: | | | |
| | | | : | | |
| Name Availabilit y | | | i | | |
| Document Examiner | _DCC_ | | | | |
| Updater | OBST | se Only | | | |
| Updater Verifyer | DC C | | | | |
| .ctmowledgement | DCC | | | | |
| fyer | DCC | | | | |



900009288399

12/04/02--01040--004 **70.00

SECRETARY OF STATE
ALLAHASSEF FLORINA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

| SUBJECT: STEVEN L FIA GOOD CONTINCTON IN | | | | | |
|--|--|--|--|--|--|
| (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", 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: | | | | | |
| (Name of Person) | | | | | |
| STEVEN LHA GOOD CONTMETORS ANC, | | | | | |
| (Firm/Company) | | | | | |
| 3639 COQUIMA KEY DR. SE - STIF | | | | | |
| (Address) | | | | | |
| STPETERSBURG PLA 33705 0 | | | | | |
| (City/State and Zip code) | | | | | |
| | | | | | |
| For further information concerning this matter, please call: | | | | | |
| STEUE HARROOD at 7727, 7418302 | | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | | | |
| | | | | | |
| STREET ADDRESS: MAILING ADDRESS: | | | | | |
| Registration Section Registration Section | | | | | |
| Division of Corporations Division of Corporations | | | | | |
| 409 E. Gaines St P.O. Box 6327 | | | | | |
| Tallahassee, FL 32399 — Tallahassee, FL 32314 | | | | | |
| Enclosed is a check for the following amount: | | | | | |
| \$70.00 Filing Fee \$\Boxed{1}\$ \$78.75 Filing Fee & \$\Boxed{1}\$\$78.75 Filing Fee & \$\Boxed{1}\$\$\$\$ \$87.50 Filing Fee, Certificate of Status & Certified Copy 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.

| 1. | STEVEN 1. HAGOOD CONTRACTOR, INC. | | |
|----|---|----------|---------|
| • | (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) | | |
| | (State or country under the law of which it is incorporated) 3 54-1205590 (FEI number, if applicable) | | <u></u> |
| 4. | 7-20-1982 (Date of incorporation) 5. PEOPETUAL (Duration: Year corp. will cease to exist or "pe | rpetu | al") |
| 6. | (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon quality (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) | ificatio | on.") |
| 7. | 3639 COQUINA KEY DR SE - ARE (Principal office address) | 02 DE | |
| | STPETERS BURG PLA 33705 (Current mailing address) | | |
| 8. | (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) | 30 | |
| 9. | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptab | le) | |
| Of | Name: STEVEN HAGOOD Ffice Address: 3639 COQUINA KEY DR SE | | |
| | STPETERS BURG, Florida 3 3 70 5 (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.

(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.

| * | |
|---|--|
| | |
| | |
| | |
| - | |

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

| · A. DIRECTORS | · | | | | |
|---|--|--|--|--|--|
| Chairman: Steve HA GOOD | | | | | |
| | ey or se | | | | |
| . STPETERS BURG FLA | 33705 | | | | |
| Vice Chairman: | | | | | |
| Address: | | | | | |
| | | | | | |
| Director: | | | | | |
| Address: | | | | | |
| | | | | | |
| Director: | SEE 02 | | | | |
| Address: | AR S | | | | |
| | SSEE L | | | | |
| | Po ≥ U | | | | |
| B. OFFICERS | ORDU | | | | |
| President: | <u>>″ </u> | | | | |
| Address: | | | | | |
| | | | | | |
| Vice President: | | | | | |
| Address: | | | | | |
| | | | | | |
| Secretary: | | | | | |
| Address: | | | | | |
| Treasurer: | | | | | |
| Address: | | | | | |
| Address. | | | | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | | | | | |
| 13. Stew Thyrr | | | | | |
| (Signature of Chairman, Vice Chairman, or any office | | | | | |
| 14. STEVEN L HAGO | od Pres | | | | |
| (Typed or printed name and capacity of person signing application) | | | | | |

Commontoealth of Hirginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

STEVEN L. HAGOOD CONTRACTOR, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is July 20, 1982.

Nothing more is hereby certified.

02 DEC -4 AN 9:30
SECRETARY OF STATE
TAIL AHASSEF ELORIDA



Signed and Sealed at Richmond on this Date: November 19, 2002

Joel H. Peck, Clerk of the Commissio