# F0500001001

(Re	equestor's Name)
(Ac	ldress)
(Ac	ldress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
2/14	FFC





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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HOME STREET POOFING 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," 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:	
YON TUTTON	
PON TUTTON (Name of Person)	
HOME STREET ROOFING INC. (Firm/Company)	
(Firm/Company)	
1290 S. BANNOCK ST.  (Address)  DENUER CO. 80223  (City/State and Zip code)	
(Address)	
DENUEL (O. SOZZZ	
(City/State and Zip code)	
For further information concerning this matter, please call:	
Anna Zoz Zog will	
(Name of Person) at (303) 359-1148  (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code at Dayline Telephone (Almber)	
STREET ADDRESS: MAILING ADDRESS:	
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:	
S70.00 Filing Fee S78.75 Filing Fee & S78.75 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.
1. HOME STREET BOOFING INC
(Easter name of corporation; must include "INCORFORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Carp," "Inc," "Co," or "Cosp.")
ROCK POOFING INJURIDERTED (If name unavailable in Physica, cator alternate corporate agent adopted for the purpose of transacting business in Florida)
2 COLURADU USA 3. 47-USS-W262 (State or country under the ten of which it is incorporated) (FEI number, if applicable)
• • • •
4. 6-27-2002 5. DEFDETUAL  (Data of incorporation) 1 (Dufation: Year corp. will cease so exist or "perpensal")
6. NA
(Date first manacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
2. 1290 5. BANNOCK ST. DENVER CO. 80223
(Principal office address)
7. 1290 5. BANNOCK ST. DENUER CO. 80223  (Principal office address)  1290 5. BANNOCK ST. DENUER CO. 80223  (Current wailing address)
•
8. Purpose(s) of corporation authorized in home state or country to be carried out in state of Florids)
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
χ 9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: MARK WOOD
Office Address: 6347 5. UFADEE AVE
ORLANDO FL Plorida 32505
(City) (Zip code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above mated corporation at the place designated in this application, I hereby necept 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.
Mark Diland
(Registered agent's digneture)

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:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President:
Address: 101023 LIETER PL.
LONE TREE CO. 80124
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addenaum to the application listing additional officers and/or directors.
13 Yales TO
(Signature of Director or Officer listed in number 12 of the application)
14. PON TUTTON DWNER PRESIDENT
(Typed or printed name and capacity of person signing application)

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE

I, Donetta Davidson, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

HOMESTREET ROOFING, INC.

### is a Corporation

formed or registered on 08/27/2002 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20021236104.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/01/2005 that have been posted, and by documents delivered to this office electronically through 02/08/2005 @ 14:37:00.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 02/08/2005 @ 14:37:00 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6145593.



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/biz/CertificateSearchCriteria.do">http://www.sos.state.co.us/biz/CertificateSearchCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select 'Frequently Asked Questions."