F06000004461

(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:
e ·

Office Use Only



200076582792

06/29/06--01020--001 **70.00

FILED

SECRETARY OF STATE
ALLAHASSEE

Temmers INN 5 8 SUDE

COVER LETTER

	(Name of corporation - must include suffix)		•
Dear	Sir or Madam:		٠.
"Cert	nclosed "Application by Foreign Corporation for Authorization to Transact Business in iticate of Existence," and check are submitted to register the above referenced foreign of the control of the contr		
	e return all correspondence concerning this matter to the following:		
<u>u</u>	TERRY J. SUZORE (Name of Person)		
	(Tumb of Telebox)		
(CARPORT STRUCTURES CORPORATION		
ىرى كىڭ ئالىگىلىدى بىندىرىدى	(Firm/Company)		_ _
	1805 METAMORA Rd. (Address) OXFORD, MICHIGAN 48371		
	(Address)		
	OXFORD. MICHIGAN 48371		
	(City/State and Zip code)	- 2 8:-	96
	(City/Calle and Dip 4004)	CR	F 1 H 6 JUN 29
Dan G	on Carrier of the companion of the matter places calls	AAS AAS	2 T
Carer iv	rther information concerning this matter, please call:	SE	,
		1	
$\sim 10^{\circ}$	HARIES HERERT DUR DOUBLE	- F	골 는
<u>C1</u>	(Name of Person) (Area Code & Daytime Telephone Number)	F <u>L</u> OI	FILED 129 PM 3:1
<u>C1</u>	(Name of Person) (Area Code & Daytime Telephone Number)	F STATE	ED PM 3: 21
<u>C1</u>	(Name of Person) (Area Code & Daytime Telephone Number)	OF STATE E, FLORIDA	- U PM 3: 21
<u>C1</u>	(Name of Person) (Area Code & Daytime Telephone Number)	FLORIDA	- U PM 3: 21
<u>C1</u>	(Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section	IF STATE FLORIDA	- L) PM 3: 21
<u>C1</u>	STREET/COURIER ADDRESS: New Filing Section Division of Corporations (Area Code & Daynine Telephone Number) MAILING ADDRESS: New Filing Section Division of Corporations	F STATE	- L) PM 3: 21
<u>C/</u>	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building (Area Code & Daytime Telephone Number) MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327	FLORIDA	- U PM 3: 21
<u>C/</u>	(Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle (Area Code & Daytime Telephone Number) MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	F STATE FLORIDA	- U PM 3: 21
<u>C1</u>	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building (Area Code & Daytime Telephone Number) MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327	FLORIDA	- U PM 3: 21
	(Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle (Area Code & Daytime Telephone Number) MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	F STATE FLORIDA	- U PM 3: 21
Enclo	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Cliften Building 2661 Executive Center Circle Tallahassee, FL 32301 sed is a check for the following amount:		3: 21
Enclo	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 sed is a check for the following amount: 1.00 Filing Fee MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314		3: 21
Enclo	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 sed is a check for the following amount: 1.00 Filing Fee S78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee	iling Fee,	3: 21

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. CARPORT STRUCTURES CORPORATION, (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (A parne unavailable in Florids, onter alternate corporate name adopted for the purpose of transacting business in Florida) 5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual") JULY 1, 2004 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability) 825 METAMORA Rd., OXFORD, Mi
(Principal office address) 825 METAMORA Rd., OXFORD, Mi. Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9: Name and street address of Florida registered agent: (P.O. Box NOT acceptable) AT SERVICES INC. 2731 Executive PARK DRIVE, Suite 4 , Florida <u>3333</u>/ 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the shove 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,

Marketied 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.

and I am familiar with and accept the obligations of my position as registered agent.

The state of the s 12. Names and business addresses of officers and/or directors: A. DIRECTORS SUZORE <u>J.</u> Chairman: MICHIGAN 48371 Vice Chairman: _____ Address: Director: Address: _ 12.7 Salvaes about the area Director: ___ CORS _ _ . Address: _ MANAGES COMPANY **B. OFFICERS** SUZORE Address: Vice President: . 1 -..... Address: = $^{\sim}$ የ**ነ**ትያት Secretary: Address: er Mitte of Capage Carp Cass . : . Treasurer: Address NOTE: If necessary; you may attach an addendum to the application listing additional officers and/or directors. 13.

(Signature of Director or Officer listed in number 12 of the application)

14 Telf JUSEPH SUZORE, PRESIDENT

(Typed or printed name and capacity of person signing application)



Lansing, Michigan

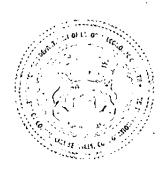
This is to Certify That

CARPORT STRUCTURES CORPORATION

was validly incorporated on September 14, 1993, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 2nd day of May, 2006.

, Director

Bureau of Commercial Services