## TRANSMITTAL LETTER Registration Section Division of Corporations 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: SERVICES INC ARASOTA 800005023898--02/27/02--01056--005

\*\*\*\*\*78.75 \*\*\*\*\*78.75

For further information concerning this matter, please call:

A12ROW at (941) 358-302/

#### STREET ADDRESS:

TO:

Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

Enclosed is a check for the following amount:

**□** \$70.00 Filing Fee

\$78.75 Filing Fee & Certificate of Status **MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

\$87.50 Filing Fee. Certificate of Status & Certified Copy

☐ \$78.75 Filing Fee & Certified Copy

-02-12 lolo



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 28, 2002

JEANIE CARROLL LYLE SERVICES INC 1153 HIGHLAND ST. SARASOTA, FL 34234

SUBJECT: LYLE SERVICES, INC. Ref. Number: W02000005847

We have received your document for LYLE SERVICES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 302A00012374

To: Michael Marp E SERVICES, INC per Bet accept

per K to vop 102

We 112/02

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			BUSINESS IN THE STATE OF	
1. LYL)	E SERVICES	INCOR	DORATED	
(Name of corpora	ation; must include the word '	'INCORPORATI	ED", "COMPANY", "CORPORA	ATION" or
natural person or	partnership if not so containe	age as will clearly  I in the name at	indicate that it is a corporation in present.)	nstead of a
	HINGTON		91-1663	
(State or country t	ander the law of which it is in		(FEI number, if a	pplicable)
4	12/22/1994	5.	DERPETUAL	
	of incorporation)		(Duration: Year corp. will cease	e to exist or "perpetual")
T	12/1/00			7
(Date first transact	ed business in Florida. If con (SEE SECT	rporation has not FIONS 607.1501	transacted business in Florida, ins , 607.1502 and 817.155, F.S.)	sert "upon qualification.")
7.	153 High la	nd 5+	SARASOTA, FL	4 34236
	· (Pri	ncipal office addr	ress)	
	SAME			
	(Cur	rent mailing addr	ess) REALESTATE HEALTH SERVI SPLE, 10 NUTRITIO	-SERVICES
SERVI	INTE FOR DE	· O'-	HEMIH SERV.	CES,
8	CIS, POR PET	5 4 PE	SPLZ, 10 NUTRITIC	ONAL PRODUCTS
(Furpose(s)	of corporation authorized in	nome state or cor	untry to be carried out in state of I	Florida)
9. Name and stree	<u>st address</u> of Florida regi	stered agent:	(P.O. Box or Mail Drop Box N	NOT acceptable)
Name: _	JEANIE CA,	ROLL		02 K
Office Address: _	1153 Highla	nd St		MAR 12
	į,		FIN 54	(234 - 195
_	(City)	, , , , , , , , , , , , , , , , , , ,	, Florida <u>FLA 3</u> 4 (Zip code)	239 3 3
10 70 1			(—F )	· · · · · · · · · · · · · · · · · · ·
10. <b>Registered age</b> Having heen name		to accont comi	ce of process for the above sta	ان الله الله الله الله الله الله الله ال
iesignatea in this a	ipplication, I hereby accep	ot the appointm	ent as registered agent and a	eree 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.				
uncs, una 1 um ju	ниш ман ана ассері іне	ovigations of	my position as registerea age	ent.
	Veanée	Carro	L)	
	(Regi	stered agent's sig	nature)	

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: <u>JEANIE CARROLL</u> Address: 1153 Highland 5t Vice Chairman: SAME Address: Address: \_ **B. OFFICERS** President: JEANIE CAMPOLL Vice President: Address: \_\_\_\_ Secretary: SAME Treasurer: \_\_\_\_\_SRMG NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) JEANE CARROLLI Chairmas (Typed or printed name and capacity of person signing application)

### STATE of WASHINGTON



## SECRETARY of STATE

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal,

hereby issue this

### CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

### LYLE SERVICES, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on December 22, 1994.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.



Date: February 14, 2002

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State