FOR	DODOOOC APLIANCE SPECIALISTS, INC.	25199
	DAVE TAYLOR, PRESIDENT 2331 Hanson Place Tallahassee, Florida 32301	FILED DIVISION OF CORPORATIONS ALLAHASSEE, FLORIDA Office Use Only
_	Voice: (850) 942-5464 Fax; (850) 942-5111 www.floridacompliance.com	Office Use Only
CORPORATION N	IAME(S) & DOCUMENT NUM	BER(S), (if known):
1. United (Corpo	Morfgage Corpo	oration of America
3	· · ·	cument #)
4.	<u> </u>	cument #)
🛛 Walk in 🕅	$R_{Pick up time} 10 [17]$	Certified Copy
Mail out	Will wait Photocopy	Certificate of Status
NEWFILINGS	AMENDMENTS	S D
Profit	Amendment =	
NonProfit	Resignation of R.A., Officer/ Direc	tor E E E
Limited Liability	Change of Registered Agent	H H H
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS: Annual Report	REGISTRATION/ QUALIFICATION	6000094087067 -10/16/0201076009 ******78.75 *****78.75
Fictitious Name	Foreign 📃	-
Name Reservation	Limited Partnership	• •
	Reinstatement	
Ļ	Trademark	
	Other	J. BRYAN OCT 1 6 2002
CR2E031(1/95)		Examiner's Initials

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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.

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No.
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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.



11. Attached is a certificate of existence dury 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.

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12. Names	es and business addresses of officers and/or directors:	
A. DIREC	CTORS	
Chairman: _		
Address:		Us KI
		$\frac{\sqrt{2}}{\sqrt{2}}$
Vice Chairm	man:	Dr. PH
Address:		SCAPOR SIS
		CALON S
Director:		
		¥
Director:		<u> </u>
		<u> </u>
		· _ · · · ·
B OFFICI		· · ·
B. OFFICĮ	A ANDA I IMAGAN	
President:		
Address:	18916 98th AUE NW	
	STANWOOD WA 98292	
Vice Presider		
Address:	18916 98th AUE NW	
	STANWOOD WA 98292	
Secretary:	Apeil E. Miller =	
Address:	18:30 CLARANCE AVE STANLOWS WAY	8292
Treasurer:	BONNA LESCER	
Address: _	18916 98th AVE STANDOOD WA 98292	
		-
NOTE: If n	necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	JUNNE TILAN	<u> </u>
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	(Typed or printed name and capacity of person signing application)	

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