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SECRETARY OF STATE

JAN 16 AN 9:18

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: LYON REALTY SERVICES INC.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in FlorCertificate of Existence", and check are submitted to register the above referenced foreign corp to transact business in Florida.	orida", oration
Please return all correspondence concerning this matter to the following:	
BILL LYON	/
(Name of Person)	<u>`</u>
LYON REALTY SERVICES, INC.	
(Firm/Company)	
394/ UPOLO LANE	OG SEC
(Address)	
NAPLES FL 54/19 85	
(City/State and Zip code)	<u> </u>
FLC	S R C
For further information concerning this matter, please call:	9
D	,,, <u>c</u>
BILL 470N at (239 598-3676	
(Name of Person) (Area Code & Daytime Telephone Number)	unio de esta de la composición della composició
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\Bigcup \$78.75 Filing Fee & B78.75 Filing Fee & \$\Bigcup \$87.50 Filing Fee & Certificate of Status Certified Copy Certifie	of Status &

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. LYON	V REALTY	SERVI	CES	INC.				
(Name of corpo words or abbre natural person	oration; must include the word " viations of like import in langue or partnership if not so containe	'INCORPORATI age as will clearly d in the name at	ED", "COMP, indicate that present.)	ANY", "CORP it is a corporat	ion instead of	а		
2. / 44/	VOIS y under the law of which it is in	3.	36	-405	4013	•		
(State or country	y under the law of which it is in	corporated)	- 1	(FEI number	r, if applicable))		
4	<u>-8-/995</u> te of incorporation)	5.	Per	METUA!				
(Da	te of incorporation)		(Duration:	Year corp. will	cease to exist	or "perpet	ual")	
6. UPON	QUALIFI.	CATIO	N	رس	a cou			
(Date first transa	acted business in Florida. If co	rporation has not FIONS 607.1501	transacted bu , 607.1502 an	siness in Florid d 817.155, F.S.	la, insert "upor .)	ı qualifica	tion.")	•
7. 3941	(SEE SECTION (Print VPOLO LN) (Cur	NAPL	ESI	2	3409			
_	(Pri	ncipal office add	ress)		7 44 43 -		٠.	
3941	veaco Lu	NAPL	-E5_	FC ?	54/19	7√1 885	3	
	(Cur	rent mailing add	ress)			₽ #	<u>_</u> =	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11 1	,					SA	E	
8. Pertor	M PPA C5 TA (s) of corporation authorized in	Te ANI	othe	or ser	ULCES.	SEA TO	53	
(Purpose	(s) of corporation authorized in	home state or co	untry to be ca	rried out in stat	te of Florida))FS		
9. Name and st	<u>reet address</u> of Florida regi	istered agent:	(P.O. Box o	r Mail Drop E	Box <u>NOT</u> acc	egable)	ؿ	
Name:	WILHAM R.	LYON			www. = "	, Mu		
Office Address:	3941 UPOLO	L.N.		- تعو				
	NAPLES (City)			a 34/	7			
	(City)		· · · · · · · · · · · · · · · · · · ·	(Zip code				
10. Registered a	agent's acceptance:							
	med as registered agent and	to accept servi	ce of proces	s for the abov	ve stated corp	oration a	at the p	olac
designated in the	is application. I hereby acce	nt the annoint	nont ac romi	stored anont a	and saree to	act in thi	c cana	city

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capaciturther 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:

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	necessary, you	may attac	h an addend	lum to the a	application l	iisting addi	itional offi				
			nan, Vice C					of the a	pplication	on)	
W	ILLIAM	R.	270		Presi			_			
	(7	Typed or p	rinted name	and capaci	ty of person	ı signing a	pplication)			

File Number _ __ 5858-213-1



To all to whom these Presents Shall Come, Greeting:



In Testimony Whereof, I, hereto set

Desse White