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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MELVIN'S LAND SERVICES 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:

LLOYD BARNARD
(Name of Person)
MELVIN'S LAND SERVICES INC
(Firm/Company)
113 BARKSDALE PROFESSIONAL CENTER
(Address)
NEWARK, DE 19711
(City/State and Zip code)

For further information concerning this matter, please call:

LLOYD BARNARD at (866) 231-2535
(Name of Person) (Area Code & Daytime Telephone Number)

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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 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. MELVIN'S LAND SERVICES INC.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 06-1666027

(FEI number, if applicable)

4. 12-18-02

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 113 BARKSDALE PROFESSIONAL CENTER DE 19711

(Principal office address)

113 BARKSDALE PROFESSIONAL CENTER, NEWARK DE 19711

(Current mailing address)

8. CONSULTING

(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 or Mail Drop Box **NOT** acceptable)

Name: LLOYD M BARNARD SR

Office Address: 3136 CLOVERPLACE DR

PALM HARBOR, Florida 34684
(City) (Zip code)

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.

Lloyd M Barnard Sr
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOHN WILLIAMS

Address: 113 BARKSDALE PROFESSIONAL CENTER
NEWARK, DE 19711

Vice President: BARRY MARTIN

Address: 113 BARKSDALE PROFESSIONAL CENTER
NEWARK, DE 19711

Secretary: DORIS MARTIN

Address: 113 BARKSDALE PROFESSIONAL CENTER
NEWARK, DE, 19711

Treasurer: BRUCE KNIGHT

Address: 113 BARKSDALE PROFESSIONAL CENTER, NEWARK, DE
19711

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. John Williams
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

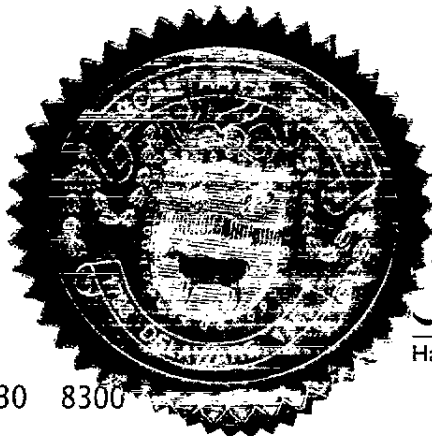
14. JOHN WILLIAMS - PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MELVIN'S LAND SERVICES INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF FEBRUARY, A.D. 2003.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3603330 8300

AUTHENTICATION: 2256021

030092986

DATE: 02-12-03