F03000000000009

(Red	questor's Name)	
(Add	iress)	
(Ado	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Coples	Certificates	of Status
Special instructions to F	iling Officer:	

Office Use Only



800019174698

##87.50 **87.50

AL

FILED 03 JUN -5 MM 9: 16

TRANSMITTAL LETTER

LUILLIANT OF STATE

Certificate of Status & Certified Copy

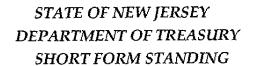
TO: Registration Section Division of Corporations	TALLAHASSEE, FLU
SUBJECT: DE MAYO CONSTRUCTION, We. (Name of corporation - must include suffix)	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact "Certificate of Existence", and check are submitted to register the above reference to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
RYAN L. STORY	
RYAN L. STORY (Name of Person)	
DEMAYO CONSTRUCTION, INC. (Firm/Company)	
(Firm/Company)	
146 LOCUST STREET (Address)	
(Address)	_
TUCKERTON, NJ 08087 (City/State and Zip code)	
(City/State and Zip code)	
For further information concerning this matter, please call:	
KATHCEEN A. STORY at (609) 294-9618	
(Name of Person) at (609) 294-9618 (Area Code & Daytime Telephone	e Number)
STREET ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	
409 E. Gaines St. P.O. Box 6327	
Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certificate of Status ☐ Certified Copy	\$87.50 Filing Fee, Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			DODIN		, , 20102			22 11	11 E	A1 9: 16
IN COMPLIANCE REGISTER A FO	F. WITH SF	CTION 607.	1503. FLORIL	DA STA	TUTES, TH	IE FOLLOV	VING IS	US JU SUBMIT	IN TO TED TO) HII 2, 10
REGISTER A FO	REIGN CO	RPORATION	I TO TRANSA	CTBU	ISINESS IN	THE STAT	E OF FL	ORIDA,	إنكاطيا	OF STATE
								TALLA	HASSE.	E, FLORIDA
I. DE	MAYO	CONST	RUCITON	(, (N	1C.					<u> </u>
(Name of corpor words or abbrev										
natural person of						i is a corpora	cion mate	id Ol a		
-	_			-						
2. NE	W JER	\$ <i>E</i> y		3		22-29	175.	54		_
(State or country	under the la	w of which it i	s incorporated)			(FEI numbe	r, if appli	cable)		
4 APRI	11.12	1988		5.		PERPE	TUAL			
4. <u>APR</u>	of incorpor	ation)		- :- · · <u>·</u> (Duration: Y	ear corp. will	cease to	exist or "p	erpetual"	<u>")</u>
	0									
6. Unate first transaction	FON 4	UALIFICA	formaration ha	ac not te	ancastad hus	inace in Flori	da incert	funan aur	lification	27)
(Date first transa	crea ousmes	(SEE S	ECTIONS 607.	.1501, 6	607.1502 and	817.155, F.S	5.)	прои фиг	mmçanon	. ,
7	66 Co.	LD IND	IAN SPA	IN65	ROAD.	OCEAN,	K.J.	0771	2	
•		((Principal office	e addres	ss)					
/	46 LC	CUST ST	REET. 7	Tuck	RERTON.	NJO	8087			•
		(Current mailing	g addres	ss)	<u> </u>	<u>, ¥ </u>			
				-	,					
0	DRNAU.	ENTAL A	ARTIL 1	1. Dal 6	TOURT	· Void				
8. (Purpose(s) of corpora	tion authorize	d in home state	or coun	ntry to be car	ried out in sta	ate of Flor	rida)		<u> </u>
9. Name and str	<u>eet addres</u>	of Florida	registered ag	ent: (I	P.O. Box or	Mail Drop	Box <u>NO</u>	Taccepta	ible)	
Nome	DOVE	THOMPS	กม่							
Name.	40 BC	LOELS S	ON PECIALTIE	SINO	 			•		Ŧ
Office Address:										
			•							
	DEERT	ield Dei	4CH		, Florida	334	4/			-
		(City)				(Zip cod	ie)			
10. Registered a	gent's acc	ontance.								
Having been nan			and to accept	service	e of process	for the abo	ve stated	l cornora	tion at t	he place
designated in this										
further agree to c	comply with	h the provisio	ons of all stati	utes rel	lative to the	proper and	l comple.	te perfori		
duties, and I am	familiar wi	th and accep	t the obligation	ons of i	my position	as register	ed agent	1		
					_					
		1 7.					-/D	widLTN	70m=~-	2
			Registère age	nt's sign	iature)	-	6	· ·		9

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 ad	Idresses of officers and/or directors:	FILED
A. DIRECTORS		03 JUN -5 AM 9: 16
Chairman:	RYAN L. STORY	
Address:	24 WEST GRANT AVE	SEUNE LANT OF STATE TALLAHASSEE, FLORIDA
	EATONTOWN, NJ 07724	
Vice Chairman:	NA	
Address:		
Director:	ANNE T. STORY	
	66 COLD INDIAN SPRINGS RD	
	OCEAN, NJ 07712	
	ATHLEEN A. STORY	
	46 LOCUST STREET	
	UCKELTON, NJ 08087	
B. OFFICERS		
	AN L. STORY	
	WEST GRANT AVENUE	
	TONTOWN, NJ 07724	
	NE T. STORY	
Address: 66	COCO INDIAN SPENSES RD	
	EAN, NT 07712	
	THLEEN A. STORY	· · · · · · · · · · · · · · · · · · ·
	6 LOCUST STREET, TUCKERTON,	ALT CROST
	ATHLEEN A. STORY	
	46 LOCUST STREET, TUCKER	
Address:	TO DUCOS! STREET, I CEMER	(ON, N) D8D87
NOTE: If necessary, you m	ay attach an addendum to the application listing a	dditional officers and/or directors.
13.	man I Stan	Pres.
	f Chairman, Vice Chairman, or any officer listed	
14. <u>R</u>	YAN L. STORY, PRESIDENT	
(Ty _l	ped or printed name and capacity of person signin	g application)



03 JUN -5 AM 9: 16 STATE SECURIDA

DEMAYO CONSTRUCTION, INC.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 12, 1988.

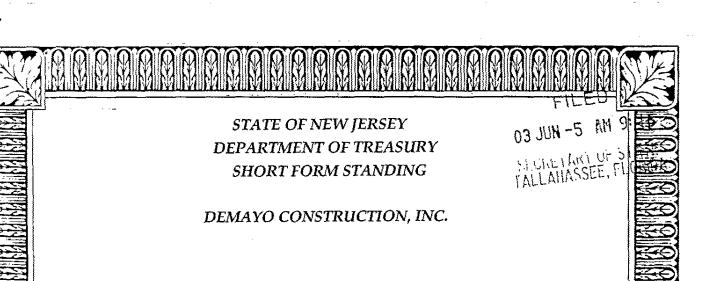
As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

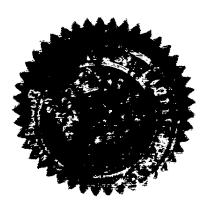
2000

I further certify that the registered agent and registered office are:

Ryan L Story 107 Riverview Ave Neptune City, NJ 07753

Continued on next page . . .





IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 7th day of May, 2003

U

John E McCormac, CPA State Treasurer