

F03000005114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

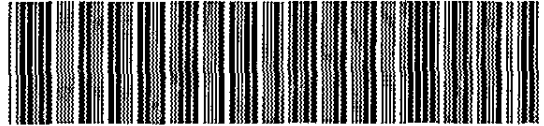
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300023638333

10/08/03--01050--014 **70.00

FILED

03 OCT -8 AM 10:27

SECRETARY
TALLAHASSEE, FLORIDA

10/15/03
[Signature]

GLOVER MARINE SERVICES, INC.

P.O. Box 2347
Palm Harbor, Florida 34682
727-787-5444
727-787-2365 - FAX



October 7, 2003

Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: FILING OF FOREIGN CORPORATION

Dear Sirs:

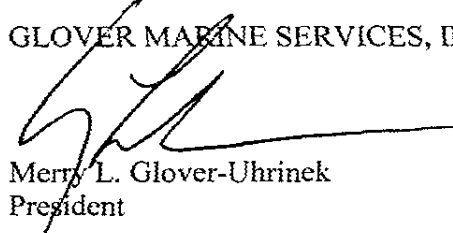
Enclosed, please find the following items:

- Transmittal Letter
- Application by Foreign Corporation etc.
- Original certificate of good standing from Wisconsin
- Check for \$70.00
- UPS return airbill w/envelope for return of Letter of Acknowledgment to our office

If you have any questions, or require anything additional, do not hesitate to contact me. Thanking you in advance, I remain,

Sincerely,

GLOVER MARINE SERVICES, INC.


Merry L. Glover-Uhrinek
President

MLU/enc

FILED
03 OCT -8 AM 10:27
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KUKUK ENTERPRISES LIMITED
(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:

MERRY GLOVER-UHRINEK
(Name of Person)
GLOVER MARINE SERVICES, INC.
(Firm/Company)
P.O. Box 2347 (using attached airbill: 8624 Lovas Trail
(Address)
Palm Harbor, FL 34682 Trinity, FL 34655
(City/State and Zip code)

For further information concerning this matter, please call:

Merry Glover-Uhrinek at (727) 787-5444
(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

03 OCT - 8 AM 10:27
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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. KUKUK ENTERPRISES LIMITED
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

KUKUK ENTERPRISES LIMITED CO.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. WISCONSIN 3. 39-1699229
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 8 1991 5. PERPETUAL
(Date of incorporation) (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. 5306 KENWOOD AVENUE, SARASOTA, FL 34234
(Principal office address)

(Current mailing address)

8. YACHT SALES
(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: Jon N. Kukuk

Office Address: 5306 Kenwood Avenue

Sarasota, , Florida 34234
(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.


(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:

FILED
03 OCT -8 AM 10:27
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Jon N. Kukuk

Address: 5306 Kenwood Avenue

Sarasota, FL 34234

Director: Susan M. Kukuk

Address: 5306 Kenwood Avenue

Sarasota, FL 34234

B. OFFICERS

President: Jon N. Kukuk

Address: 5306 Kenwood Avenue

Sarasota, FL 34234

Vice President: _____

Address: _____

Secretary: Susan M. Kukuk

Address: 5306 Kenwood Avenue, FL 34234

Treasurer: Susan M. Kukuk

Address: 5306 Kenwood Avenue, Sarasota, FL 34234

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

13. ☒ _____

(Signature of Director or Officer listed in number 12 of the application)

14. Jon N. Kukuk Susan M. Kukuk

(Typed or printed name and capacity of person signing application)

FILED
03 OCT -8 AM 10:27
SECRETARY OF
TALLAHASSEE, FLORIDA

DOM
180 181 185

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Present Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions do hereby certify that

KUKUK ENTERPRISES LIMITED

is a domestic corporation organized under the laws of this state and that its date of incorporation is MAY 8, 1991.

I further certify that said corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on September 15, 2003.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY: Patricia Weber

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.