F03000005469

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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J03-5469

TRANSMITTAL LETTER

TO: Registration Section Division of Corporation	
SUBJECT: W. T.	Name of corporation - must include suffix)
Dear Sir or Madam:	
2 2	by Foreign Corporation for Authorization to Transact Business in Florida", and check are submitted to register the above referenced foreign corporation to a.
Please return all correspond	dence concerning this matter to the following:
TCAVIS	M. Brinsko, CPA (Name of Person)
	(Name of Person)
HOAWM	4
	(Firm/Company)
100 Pet	(Address)
) C	1
LATAYE	City/State and Zip code)
	(Crty/state and Zip code)
For further information con	ncerning this matter, please call:
1 of fatalog gazotmation con	Serving and institut, product of
Travis M. Br	insko at (337) 232-3637 (Area Code & Daytime Telephone Number)
(Name of Person)	insko at (337) 232-3637 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations 409 E. Gaines St.	Division of Corporations 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 & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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.

x and atala

1	M. I. DESVOICIS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
יו	'Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
7	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	1 ONISIANA 3 72-1471839
ے، S	LOUISIANA 3. 72-1471839 State or country under the law of which it is incorporated) (PEI number, if applicable)
4	(Date of incorporation) 5. Per petual (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
_	man and E. A. Line a
6.	Upon qualification
(L	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.)
	(SEE SECTIONS 007.1501, 007.1502 and 617.155, 1.5.)
7.	120 LOCTAINE DOINE South MARY Esther, FL 32569 (Principal office address)
	(Principal office address)
	120 LOCTAINE Drive South Mary Esther, FL 32569
_	(Current mailing address)
	(Current maring address)
3	0.1 And GAS CONSULTING
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
}. N	Name: William T- Deshotels
	Name: William T. Deshotels
	- · · · · · · · · · · · · · · · · · · ·
Offic	ce Address: 120 LOCKAINE Drive South
	MACY Esther, Florida 32569 (City) (Zip code)
	· (City) (Zip code)

10. Registered agent's acceptance:

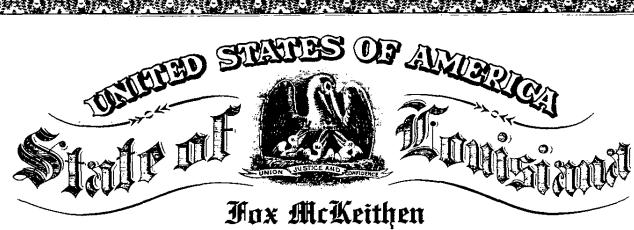
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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:

A. DIRECTORS	
Chairman: William T. Deshotels	
Address: 120 LOCKAINE Drive South	
Mary Esther, FL 32569	
Vice Chairman:	<u> </u>
Address:	
Director:	
Address:	
Director: <u>Caroline Deshotels</u>	
Address: 120 LOCKAINE DEWE South	
Mary Esther, FL 32569	
B. OFFICERS	
President: William T. Deshotels	
Address: 120 Loccaine Drive South	
Mary Esther, FL 32569	
,	野 章
Vice President:	
Address:	3 / / \
Secretary:	<u> </u>
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	d/or directors.
13. War Ocalu 10/27/03	
(Signature of Director or Officer listed in number 12 of the application)	
14. William T. Deshotels, President/Director	
(Typed or printed name and capacity of person signing application)	



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that W.T. DESHOTELS, INC.

A LOUISIANA corporation domiciled at LAFAYETTE,

Filed charter and qualified to do business in this State on April 10, 2000,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on, September 29, 2003

-EDT 34'923228D

Secretary of State

