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SECRETARY UN STATE
TALLAHASSEE, FLORIDA

10 2404

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: KLMN OF NC, 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:
Dallas Norris
(Name of Person)
All About Weddings
(Firm/Company)
17596 Osprey Inlet Court
(Address)
FT Myers FL 33908 (City/State and Zip code)
To o
For further information concerning this matter, please call:
Dallas Norris at (239) 337-1110 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
RATE TE
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 & ☐

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "COMPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 1/18/96 (Date of incorporation) (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.) (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 acceptab Office Address: 10 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 fegistered 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: Karen Mongan Norris
Address: 17596 Osprey Inlet Ct
FT Myers, #1 33908
Vice Chairman: Dallas Nocris
Address: 17596 Osprey Inlet Ct
FT Myers, FL 33908
Director:
Address:
Director:
Address:
B. OFFICERS
President: Karen Murgan Norril
Address: 17596 Osprey Friet Ct Ft Myers, FL 33908 FS &
FT Muers, FL 33908 FS &
Vice President: De las Nocris
Address: 17596 Osprey Inlet Cto 3 F
Fr Myers FL 33908 FS = 0
Secretary:
Address:
Treasurer: Dallas Norris
Address: 17596 Osprey Inlet CT FT. Myers FL
33908
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
Dallas Namain Tanks
(Typed or printed name and capacity of person signing application)



State of North Carolina Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

KLMN OF N.C., INC

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of January, 1996, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State, if applicable; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF. I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of June, 2004.

Elaine I. Marshall

Secretary of State

Certification Number: 8744898-1 Page: 1 of 1