# F04000004440

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(Re	questor's Name)		_	
(Address)				
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(Cit	ty/State/Zip/Phone	#)	_	
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)		-	
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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### TRANSMITTAL LETTER

TO:	Registration Sect Division of Corp			· 		. :
SUBJ	ECT: IMAGEMAS	STER, INC.				<u> </u>
			(Name of corp	oration - must includ	le suffix)	
Dear S	Sir or Madam:					
"Certif		", and check are	•	Authorization to Tra		-
Please	return all correspo	ondence concern	ning this matte	r to the following:		
JEFF	DOLOWY			<u></u>		~
			(Name	of Person)		
PLAN	TE & MORAN,	PLLC			,	
			(Firm/	Company)		
350	SOUTH MAIN S	TREET. SUIT	TE 200 -			•
				idress)		
	17707 NT 40	104	`	,		•
ANN	ARBOR, MI 48	104	(City/State	and Zip code)	<u></u>	
			(City/Dutte	una Zip codo)		
For fu	rther information o	concerning this	matter, please	call:		
10114		_	_		TO THE STREET OF	
	JEFF Do		at		-665-9494 Suytime Telephone Nu	2
STRE	(Name of	reison)	·	MAILING A	, , , ,	
Regist	ration Section			Registration S	Ţ.	強っなし
	on of Corporations	S		Division of Co		
	Gaines St.			P.O. Box 6327	INNI	10.
Tallaha	assee, FL 32399			Tallahassee, F	L 32314 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•
Enclos	sed is a check for t	he following am	ount:		V	
X \$70	0.00 Filing Fee	\$78.75 Fil Certificate	_	\$78.75 Filing Fee Certified Copy	_	Filing Fee, ate of Status & d Copy



#### FLORIDA DEPARTMENT OF STATE

Glenda E. Hood Secretary of State

April 2, 2004

JEFF DOLOWY 350 SOUTH MAIN STREET, SUITE 200 ANN ARBOR, MI 48104

SUBJECT: IMAGE MASTERS, INC.

Ref. Number: W04000012947

Hood State deservition deservi

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We have received your document for IMAGE MASTERS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$1220.00.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of aname is not acceptable.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 404A00021746

Plante & Moren, PLLC Succ 200 350 S Main St

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## PERSONAL AND CONFIDENTIAL

To:

Ms. Brenda Tadlock Barre Cr Siz Date:

TALLAHASSEE, FLORIDA

5/5/04

From:

Jeff Dolowy

Fax Number:

850-410-1015

Re:

imagemaster, Inc.

Number of Pages:

(including this cover sheet)

#### Comments:

Ms. Tadlock

Attached is a letter and a copy of the notice received from your office. Please review. I will follow up with you later today to discuss. If in the meantime, you would like to reach me, please call (734)-302-5911

Thank you

Jeff

If you have any questions or you do not receive the proper pages, please call 734,665,9494, Extension.

#### IMPORTANT:

The information contained in this facsimile message is intended only for the personal and confidential use of the designated recipient named above. If you are not the intended recipient, or an agent responsible for delivering it to the intended recipient, please return it to us as soon as possible or rollly us by telephone



CHOIS LORINGS After Misson After Title Tel 794 665 3494 las 134666 3554

两期 20 和 9:22 May 5, 2004 DEUTICIARY\_OF STATE TALLAFIASSEE, FLORIDA

Ms. Brende Tadlock Florida Department of State Division of Corporation P.C. Box 5327 Tallahassee, FL 32314

Imagemaster, inc EIN#36-1885218

Dear Ms Tadlock.

As accountants for the above named taxpayer, Imagemester, Inc., I am writing you in response to a notice received from dated April 2, 2004 concerning image master, Inc. The notice outlines a reason for a penalty that Is being charged by the State for doing business in Florida prior to receiving the authorization to conduct bus ness in Florida

Imagemaster, Inc. was formed and began bus ness on January 1, 2003. its customers in F orida require that the company be a registered business in the State of Florida. As such, the application to conduct business in Florida was completed and mailed to the State subsequent to January 1, 2003. Although the registration was completed after the business began, Imagemaster has yet to "conduct business" in Florida, all operations are in Michigan. The Company does not have employees in the State, if does not lease space, own property or inventory, or had any employees enter the State for business purposes since business began. The Company's only connection with Florida is the shipment of langible personal properly to customers in the Siete. The date used on the application was an arb trary date chosen to complete the application.

Based on the facts mentioned above, I respectfully request that you waive the \$1,150 penalty assessed in the notice dated April 2, 2004. I appreciate your attention to this matter and if you have any further in ouestions, please call me at (734)-302-6911.

Very truly yours,

Jeffrey P Dolowy Plante & Moran, PLLC





Plante & Moran, PLLC

Suite 200 350 S. Main St. Ann Arbor, MI 48104 Tel: 734.665.9494 Fax: 734.665.0664 plantemoran.com

May 5, 2004

Ms. Brenda Tadlock Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

RE:

Imagemaster, Inc.

EIN 06-1665218

Dear Ms. Tadlock,

As discussed on the phone on May 6, 2004, I am forwarding you additional information so that the application to register to do business in Florida can be approved by you. Enclosed, please find a check for \$70 representing the payment for registration, a revised application with an alternate name for the Company for transacting business in Florida, and a copy of a certificate of good standing in the State of Michigan, as you requested. Please note that the certificate has a different name, Imagemaster/Munios, Inc. This name was subsequently changed to Imagemaster, Inc., however, the certificate relates to the same company.

I am hopeful that this information satisfies the State of Florida and the application is approved. If you have any further questions regarding this matter, please call me at (734)-302-6911.

Very truly yours,

Jeffrey P. Dolowy Plante & Moran, PLLC CORTAIN OF SIME

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# 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.

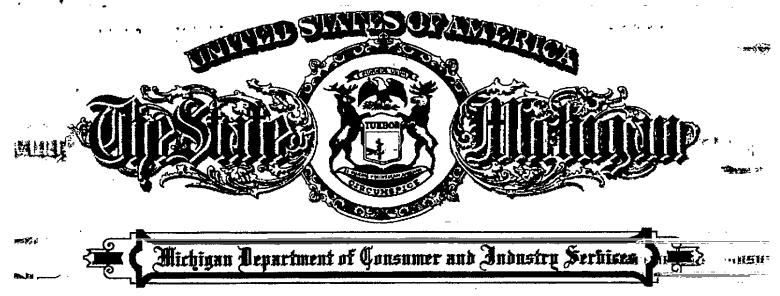
1. IMAGEMASTER, INC.	
(Enter name of corporation; must include "INCORPORATED," "Co," or "Corp.")	"COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc,"
MUNIOS, FIRC.	
(If name unavailable in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)
2. MICHIGAN	3. 06-1665218
2. MICHIGAN  (State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. JANUARY 1, 2003 (Date of incorporation)	5. PERPETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. JANUARY 1, 2003	
(Date first transacted business in Florida. If corporation has not (SEE SECTIONS 607.150	transacted business in Florida, insert "upon qualification.") 1, 607.1502 and 817.155, F.S.)
7. 1182 OAK VALLEY DRIVE ANN ARBOR MI	48108
	office address)
	·
(Current m	ailing address)
8. FINANCIAL PUBLISHING	
	state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. I	Box or Mail Dron Box NOT acceptable)
Name: HIBERT KOAIIGUEZ	
Name: Albert Rodriguez  Office Address: 31 Tuscany Points Ave.  Orlando,  (City)	
Octordo	Florida 32807
(City)	(Zip code)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of p	rocess for the above stated corporation at the place designated in
his application, I hereby accept the appointment as registered ago	
vith the provisions of all statutes relative to the proper and compl he obligations of my position as registered agent.	ere perjormance oj my auues, and 1 am jamuuar wun and accept

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.

(Registered agent's signature)

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

A. DIRECTORS	6 * 1 V *
Chairman: ALBERT M. RODRIGUEZ	<u> </u>
Address: 1182 OAK VALLEY DRIVE	
ANN ARBOR, MI 48108	
Vice Chairman:	,
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	· · · · · · · · · · · · · · · · · · ·
President: ALBERT M. RODRIGUEZ	
Address: 1182 OAK VALLEY DRIVE	
ANN ARBOR, MI 48108	
Vice President:	
Address:	
Secretary:	Fig. No. 400
Address:	<del>V</del>
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application	on listing additional officers and/or directors.
13. (Signature of Director or Officer	listed in number 12 of the application)
14 ALBERT M. RODRIGUEZ, PRESIDENT	pacity of person signing application)



Lansing, Michigan

This is to Certify That

#### IMAGEMASTER/MUNIOS, INC.

was validly incorporated on December 17, 2002, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 704653

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 7th day of February, 2003

Director

Bureau of Commercial Services...