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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SNG Services, 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:

Susan M. Loyacono  
(Name of Person)  
SNG Services, Inc.  
(Firm/Company)  
PO Box 10765  
(Address)  
Naples, FL 34101  
(City/State and Zip code)

For further information concerning this matter, please call:

Susan Loyacono at (239) 775-3824  
(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

**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. SNG Services, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"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)

2. Colorado 3. 45-0463604  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/28/02 5. Ø  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. July 1, 2004  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7605 Arbor Lakes Ct. #535, Naples, FL 34112  
(Principal office address)

PO Box 10765 Naples, FL 34101  
(Current mailing address)

8. entertainment  
(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 NOT acceptable)

Name: Susan Loyacono

Office Address: 7605 Arbor Lakes Ct. #535  
Naples, Florida 34112  
(City) (Zip code)

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**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.*

Susan M. Loyacono  
(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: Susan Loyacono

Address: 7005 Arbor Lakes Ct. #535  
Naples, FL 34112

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Susan Loyacono

Address: PO Box 10765  
Naples, FL 34101

Vice President: N/A

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. Susan M. Loyacono  
(Signature of Director or Officer listed in number 12 of the application)

14. SUSAN M. LOYACONO  
(Typed or printed name and capacity of person signing application)

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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE**

I, Donetta Davidson, as the Secretary of State of the State of Colorado, hereby certify that,  
according to the records of this office,

SNG SERVICES, INC.

is a  
Corporation

formed or registered on 01/28/2002 under the law of Colorado, has complied with all applicable  
requirements of this office, and is in good standing with this office. This entity has been  
assigned entity identification number 20021020307 .

This certificate reflects facts established or disclosed by documents delivered to this office on  
paper through 06/30/2004 that have been posted, and by documents delivered to this office  
electronically through 07/22/2004 @ 18:59:40 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed,  
authenticated, issued, delivered and communicated this official certificate at Denver, Colorado  
on 07/22/2004 @ 18:59:40 pursuant to and in accordance with applicable law. This certificate is  
assigned Confirmation Number 6014102 .



*Donetta Davidson*

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*