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(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:				
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TRANSMITTAL LETTER

то:	Registration Se Division of Co	rporations		
SUBJ	ECT:	BARRETT	ENTERPRISES	Tuc
0020			ation - must include suffix)	
Dear S	ir or Madam:			
"Certif		tion by Foreign Corporation e," and check are submitted rida.		
Please	return all corresp	oondence concerning this ma	tter to the following: BACCETT	
·			e of Person)	
		DAIrett.	Enterprises (Company)	Ide
		PO BOX 1	8	·
		SANOY	ddress) Point ME ate and Zip code)	04972
		(City/Sta	ite and Zip code)	
For fu	rther information	concerning this matter, plea-		
	(Name of Pers	at (28)	7 567-7076 ea Code & Daytime Teleph	one Number)
	STREET ADI Registration Se Division of Co. 409 E. Gaines Tallahassee, FI	ction rporations St.	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclos	ed is a check for	the following amount:		
3 \$70	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 10, 2005

CARALEE BARRETT BARRETT ENTERPRISES, INC. P.O. BOX 18 SANDY POINT, ME 04972

SUBJECT: BARRETT ENTERPRISES, INC.

Ref. Number: W05000023666

We have received your document for BARRETT ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 a name is not acceptable.

The document must have original signatures.

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) 245-6967.

Letter Number: 705A00033487

Michelle Hodges Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITI REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	TED TO
	wrett Enterprises	
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION," orp," "Inc," "Co," or "Corp.")	
BArrett (If name unavaila	Tenterprises Ive, Irrorative Heating + Co	in Florida
2. Mai	under the law of which it is incorporated) (FEI number, if applicable)	·
4. Main	of incorporation) (FEI number, if applicable) (PEI number, if applicable) (PEI number, if applicable) (PEI number, if applicable) (Perparture) (Duration: Year corp. will cease to exist or "p	- 100 - 100
	(Duration: Year corp. will cease to exist or "p	erpetual")
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) SANDY POINT ROLL SANLY POINT ME (Principal office address)	04972
Po box	(Principal office address) 18 SANDY POINT ME 04872 (Current mailing address)	
8. Busi (Purpose(s)	がという となりましている。 という of corporation authorized in home state or country to be carried out in state of Florida)	05 HAY
9. Name and street	t address of Florida registered agent: (P.O. Box NOT acceptable)	N ===
Name:	Reta Roberts	70
Office Address:	Ferralia Dead, Florida 32034 (City) (Zip code)	2: 30
designated in this a further agree to co		this capacity. I
	(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:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Addition.
B. OFFICERS President: Address: DANL SANL Vice President: Address:
Secretary;
Address:
Treasurer:
Address:
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) (Article M. Barett
14. CAPACE M. WAVELL

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

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the records of organization, amendment, and dissolution of corporations and annual reports filed by the same.

I further certify that BARRETT ENTERPRISES, formerly COASTAL WARM THRU WOOD, INC. is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is May 23, 2002.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed, given under my hand at Augusta, Maine, this twenty-eighth day of April 2005.

MATTHEW DUNLAP
Secretary of State

