

F0500000 3613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

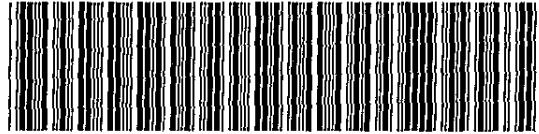
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 3, 2005

RHONDA HAMMOND  
PMB #275 16520 S. TAMiami TRAIL #18  
FT. MYERS, FL 33908

SUBJECT: COMMUNITY AFFAIRS ART AND CRAFT SHOWS INC.  
Ref. Number: W05000022370

We have received your document for COMMUNITY AFFAIRS ART AND CRAFT SHOWS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6890.

Jason Merrick  
Document Specialist

Letter Number: 205A00031497

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TALLAHASSEE, FLORIDA

ATX1

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** COMMUNITY AFFAIRS ART AND CRAFT SHOWS 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:

RHONDA HAMMOND  
(Name of Person)

COMMUNITY AFFAIRS ART AND CRAFT SHOWS INC.  
(Firm/Company)

PMB # 275 16520 SOUTH TAMiami TRAIL # 18  
(Address)

FT. MYERS, FL 33908  
(City/State and Zip code)

For further information concerning this matter, please call:

RHONDA HAMMOND at 508-737-0998  
(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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COMMUNITY AFFAIRS ART AND CRAFT SHOWS INC.

20-2139544

ATX1

**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. COMMUNITY AFFAIRS ART AND CRAFT SHOWS 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. NEW YORK

(State or country under the law of which it is incorporated)

3.

20-2139544

(FEI number, if applicable)

4.

1/1/2005

(Date of incorporation)

5.

Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

De Ruyter, New York

7. DERUYER, N.Y.

(Principal office address)

PMB # 275 16520 SOUTH TAMiami TRAIL # 16, FT. MYERS, FL 33908

(Current mailing address)

8.

arts + craft show organizer

(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: RHONDA HAMMOND

Office Address: PMB # 275 16520 SOUTH TAMiami TRAIL # 16

FT. MYERS,

(City)

Florida

33908

(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.

(Signature)

(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COMMUNITY AFFAIRS ART AND CRAFT SHOWS INC.

20-2139544

ATX1

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

**B. OFFICERS**President: RHONDA HAMMONDAddress: 16520 SOUTH TAMiami TRAILFT. MYERS, FL 33908

Vice President: \_\_\_\_\_

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

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

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

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

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

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

13. Rhonda D. Hammond

(Signature of Director or Officer listed in number 12 of the application)

14. Rhonda Hammond - President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Please

**State of New York** | **ss:**  
**Department of State**

I hereby certify, that the Certificate of Incorporation of COMMUNITY AFFAIRS ARTS & CRAFTS SHOWS, INC. was filed on 12/17/2004, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 14th day of March  
two thousand and five.*

A handwritten signature in black ink, appearing to read "R. A. D. S.", written over a faint, stylized outline of the state of New York.

*Secretary of State*

200503150115 72

RHONDA HAMMOND  
16520 SOUTH TAMiami TRAIL #18  
FT. MYERS FL 33908

Enclosed is the information you requested. Your payment of \$25.00 is hereby acknowledged.

If the name on the enclosed document(s) does not match exactly with the name of the entity you requested, this office does not have a record of the exact name you requested. The document(s) provided appear(s) to be of sufficient similarity to be the entity requested.