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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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(05/3/92)

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
· ^
SUBJECT: (Name of corporation - must include suffix)
(Name of corporation - must include surfix)
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:
David Dondy
(Name of Person)
Certified Finishs
(Name of Person) Certified Finishes (Firm/Company)
(Address) Atlant, G. 30714 (City/State and Zip code)
(Address)
Adata G 31314
(City/State and Zip code)
For further information concerning this matter, please call:
David Dendy at (You) 3559151 STORE (Name of Person) (Area Code & Daytime Telephone Number) STORE
Area Code & Daytime Telephone Number STREET ADDRESS: Registration Section Registration Section 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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMINESSIN THE STATE OF FLORIDA Legister A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
(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 busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the purpose of transacting busing the original section of the original section	•
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
(Date of incorporation) 5. Penpetual (Duration: Year corp. will cease to exist o	
(Date of incorporation) (Duration: Year corp. will cease to exist o	r "perpetual")
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
1015 Collies Rd StG Atlants, Co. 30318 (Principal office address)	···
O15 Collins Rd 546 Adjourney Gr. 30318	9
(Current mailing address)	<u>~</u>
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	05 JUN 30 PM
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	1: 32
Name: David Dardy	32
ffice Address: 27 Red fish Circle Squata, Resa Beach, Florida 31328 (City) (Zip code)	
Santa Rosa Beach Florida 52328	
(City) (Zip code)	
2). Registered agent's acceptance: I aving been named as registered agent and to accept service of process for the above stated corporesignated in this application, I hereby accept the appointment as registered agent and agree to accept the agree to comply with the provisions of all statutes relative to the proper and complete performed I am familiar with and accept the obligations of my position as registered agent.	t in this capacity
Dans On	
(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:

DIRECTORS		•
airman: Ralph Shields		
idress: 672 Lilson Nd Athylo, G 30318	·	·
·		
S	· -	
dress: 1501 Markon Drive Atlata, Gi 30300	<u> </u>	<u> 4 .</u>
dress: 1) 01 10 100 111.12 Atlatt, Ut 30 200	<u> </u>	
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OFFICERS		•
sident: Ralph Shields		y en ev.
dress: 67) wilson Rd Atlant, Ca 30714	_	TAL
		CRE A.F.
		SSP
e President:	- ·	
dress:	**	To Contract of the Contract of
	<u> </u>	XATE DATE
retary: David Dendy	· · · · · · · · · · · · · · · · · · ·	>
iress: 1500 Marka Prive Allah, Ca 3070Co		
Do est A 1		
	* 1	
dress: KOU North Dish Atlant, Go 3000		
Tre If management you may attack an addenduct to the until attach like and date of the		
OTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.	
(Signature of Director or Officer listed in number 12 of the application		 +
	·	
David Dendy Treasury and S.	ecretary	

···-

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0427227
DATE INC/AUTH/FILED: 04/29/2004
JURISDICTION : GEORGIA
PRINT DATE : 06/28/2005

FORM NUMBER : 211

CERTIFIED FINISHES
DAVID DENDY
1015 COLLIER RD SUITE G
ATLANTA, GA 30318

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

CERTIFIED FINISHES, INC.

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date, and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050628145007844



Cathy Cox Secretary of State