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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations
SUBJ	CT:Interior Magic of Florida, Inc.
	(Name of corporation - must include suffix)
Dear S	or Madam:
"Certi	osed "Application by Foreign Corporation for Authorization to Transact Business in Florida," ate of Existence," and check are submitted to register the above referenced foreign corporation to ousiness in Florida.
Please	turn all correspondence concerning this matter to the following:
	chael R. Lumley
	(Name of Person)
	erior Magic of Florida, Inc.
	(Firm/Company)
	10 Lake Blue Circle
	(Address) $\geq \simeq$
	oopka, FL 32703
For fu	(City/State and Zip code)
Mic	el Lumley at (321) 202-0280
	Name of Person) (Area Code & Daytime Telephone Number)
** Enclos	TREET ADDRESS: degistration Section division of Corporations OPE. Gaines St. allahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 is a check for the following amount:
	Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy 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.	Interior Magic of Florida, Inc.						
	(Enter name of corporation; must include "INCORPORATI"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATI	ON,"			
	(If name unavailable in Florida, enter alternate corporate na	me	adopted for the purpose of transac	ting busing	ness in F	lorida)	
2.	North Carolina	3.	EIN: 27-0123126				
	(State or country under the law of which it is incorporated)		(FEI number, if a	pplicable))	_	
4.	May 5, 2005	5.	Perpetual				
	(Date of incorporation)		(Duration: Year corp. will cease	to exist o	or "perp	etual")	
6.	8/01/05						
7	(Date first transacted busine: (SEE SECTIONS 607.1501 & 60' 1210 Lake Blue Circle, Apopka, FL 32703	ss in 7.15	n Florida, if prior to registration) 02, F.S., to determine penalty liab	oility)			
/٠.	(Principal office	ıddr	ess)				
	1210 Lake Blue Circle, Apopka, FL 32703		· -	Z.			
	(Current mailing	addı	ess)		- <u>S</u>		
8.	Auto interior repair			RETAR	AUG 1		
	(Purpose(s) of corporation authorized in home state of	r co	untry to be carried out in state of l	lorida)	ထ		
9.	Name and street address of Florida registered agent: (P.O	. Box NOT acceptable)	EL 32	U =		
	Name: Michael R. Lumley		<u></u>	377	20		
Oí	ffice Address: 1210 Lake Blue Circle				_		
	Apopka		, Florida 32703				
	(City)		(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.

Michael R. Sumley,
(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:

rman:			
ess: _			
-			
	rman:		
ess: _			· , <u>, , , , , , , , , , , , , , , , , ,</u>
- ctor: _	Michael R. Lumley		
ess:	1210 Lake Blue Circle		
_	Apopka, FL 32703		
tor:			-
FFI	CERS		2005 SECH TALLA
dent:	Michael R. Lumley		AR A T
ess: _	1210 Lake Blue Circle		(n) ≥
_	Apopka, FL 32703		TA T M
Presid	dent:		RA -
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tarv:			, , , , , , , , , , , , , , , , , , , ,
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	f necessary, you may attach an addendum to th		litional officers and (and in the second
1.	mile of de	2	
	(Signature of Director or Officer I	1 10 011	

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



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

INTERIOR MAGIC OF FLORIDA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 5th day of May, 2005, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of August, 2005

Secretary of State

6 laine I. Marshall