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TO WHOM IT MAY CONCERN:

If you could please review my package and see it there is any additional in for me tion that you need for me, and ple-se centact me as soon as poss. 6/2 at the # below, so I can go they get any Missingia facosition. I love attempted to give more than the inter metian aske for, to help with this process In here 12 already passed the Florina Cont Maction SW 18 Exam, all an just wonting for Pas ? to bish my lives applications to did Not relie this was necessary in the License Application (my our fouthil) or I would have set this weeks ago It you " Could please process this as quely as 10 1 possible; I and my family would deap appreci-te it we moved pour here in June Aus Have had no income since then, offer than 5:00 jats I have picked up. THANK you for your tense and any cotta effort you could give this application S-accrety, Mank Dean & Family

748-342-6982

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DM DEAU, INC.		
(Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in "Certificate of Existence," and check are submitted to register the above referenced foreign of transact business in Florida.	n Florida," corporation	to
Please return all correspondence concerning this matter to the following:		
MARK DEAN (Name of Person)		
(Name of Person)		
DM DEAU, INC. (Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·		05
5881 GILLOT BLUD. (Address)	- SEC	220
PORT CHARLOTTE, FL. 3398/ (City/State and Zip code)		UG 3
PONT CHARLOTTE, FL. 33981		
' (City/State and Zip code)	<u>, n</u>	PH
	왕	
For further information concerning this matter, please call:	∌m	Ö
MARK DEAN at (ZY8) 342-6987 (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:		
Certificate of Status Certified Copy Certificate Copy	Filing Fee, icate of Sta ied Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

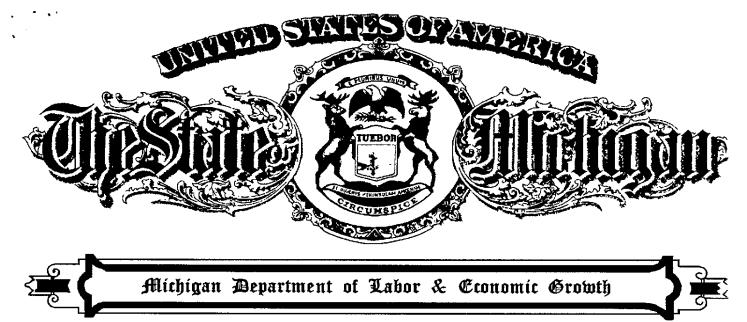
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. MICHIGAN (State or country under the law of which it is incorporated) 3. 38 335 4384 (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 5/13/97 (Date of incorporation) 5. PRAPETUAL (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)	
7. 6700 LAURELTON CLANKSTON, MI, 48346	
(Principal office address) 5881 6160 BCVD. PORT CHARLOTTE FL. 33° (Current mailing address)	78
8. RESIDENTIAL CONSTRUCTION	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: MARK DEAN	Tŀ
Office Address: 5881 GICLOT BUD.	門門
Name: MANK DEAN Office Address: 5881 G/CLOT BLUD. PONT CHANCOTE, Florida $3398/$ (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 dutie and I am familiar with and accept the obligations of my position as registered agent.	ř,
Man Du	
(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
Director:
Address:
Director:
Address:
B. OFFICERS
President: MARK DEAN 100% OWNER Address: 5881 GICCOT BCUD. QUALIFYIER \$162
Address: 5881 GICCOT BCUP. QUALIFY TO \$168
PORT CHANCOTTE, FL. 33981
Vice President:
· · · · · · · · · · · · · · · · · · ·
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If recovery years and an add a fact that the same of the sam
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
Mark Dec. of Dec.
(Typed or printed name and capacity of person signing application)



Lansing, Michigan

This is to Certify That

DM DEAN, INC.

was validly incorporated on May 13, 1997, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 23rd day of August, 2005.

, Director

Bureau of Commercial Services