# F0500005233

|                                       | T. J.L.           |
|---------------------------------------|-------------------|
| (Requestor's N                        | lame)             |
|                                       |                   |
| (Address)                             |                   |
|                                       |                   |
| (Address)                             |                   |
|                                       |                   |
| (City/State/Zip                       | /Phone #)         |
| PICK-UP WA                            | NT MAIL           |
|                                       |                   |
| (Business Enti                        | ty Name)          |
|                                       |                   |
| (Document Nu                          | mber)             |
| Certified Copies Certi                | ficates of Status |
| • ——                                  |                   |
| Special Instructions to Filing Office | er:               |
| 22                                    | ١,                |
| WO5 240 335                           | 1                 |
| 205                                   |                   |
| W <sup>o</sup>                        | ***               |
|                                       |                   |
|                                       |                   |
|                                       |                   |

Office Use Only



200058719812

08/25/05--01012--032 \*\*70.00



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

741 57 D 200 52 - 6 A 11: 46 742 24 24 A 14: 46

August 25, 2005

FAUSTINO S. MCKAMEY 573 SIENNA DR. KISSIMMEE, FL 34759

SUBJECT: GMC GROUP, INC. Ref. Number: W05000040333

We have received your document for GMC GROUP, INC. and your check(s) totaling \$70.00. 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 905A00053992

## 

### TRANSMITTAL LETTER

|  | IRANSMI                                      | ITALLETTER   |  |
|--|--|--|--|
| <b></b>  |  |  | 3052 SEP -P V 11: 4P                                       |
| TO: Registration Sec<br>Division of Corr                                       |  |  | WALLEY A LONDA   |
| •  |  |  | TALL TO A LOADA  |
| SUBJECT:   | MC GROUP                                     | oration - must include suffix)                                   |  |
|  | (Name of corpo                               | oration - must include suffix)                                   |  |
| Dear Sir or Madam:   |  |  |  |
| The enclosed "Application "Certificate of Existence transact business in Flori | ," and check are submitted                   | n for Authorization to Transa<br>d to register the above referen | ct Business in Florida," need foreign corporation to       |
|  | ondence concerning this m                    |  | •  |
| FAUSTINO   | S. Mckan                                     | ne of Person)  |  |
|  | (Nan   | ne of Person)  |  |
| GMC G  | ROUP INC                                     |  |  |
|  | (Firm  | n/Company)   |  |
| 573 5/e  | WNA DR.                                      |  |  |
|  | (,   | Address)   |  |
| Kissimme   | e FL, 3475                                   | Address)  4  tate and Zip code)                                  |  |
| •  | (City/S                                      | tate and Zip code)   |  |
|  |  |  |  |
| For further information c  | oncerning this matter, plea                  | ase call:  |  |
| FAUSTING S.M<br>(Name of Person  | ckamey at (3)                                | 21 ) 281-7046<br>rea Code & Daytime Telepho                      | one Number)  |
|  |  |  |  |
| STREET ADD   |  | MAILING AI   | DDRESS:  |
| Registration Sect  |  | Registration S   |  |
| Division of Corp<br>409 E. Gaines St.  |  | Division of Co<br>P.O. Box 6327                                  |  |
| Tallahassee, FL  |  | Tallahassee, F   |  |
| Enclosed is a check for the  | ne 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 Conv |

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

|   | CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDAD - A  GROWP, /NC.  ion; must include "INCORPORATED," "COMPANY," "CORPORATION;  |
|---|---|
| Inc.," "Co.," "Corp," "I  | nc," "Co," or "Corp.")  |
| GM C. If name unavailable in I  | GROWP OF NEVADA /NC. Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  |
|   |   |
| State or country under the  | he law of which it is incorporated)  (FEI number, if applicable)  |
| July 28,<br>(Date of inco   | 5. (Duration: Year corp. will cease to exist or "perpetual")  |
| Aug bys   | (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607 1501 & 607 1502 E.S. to determine penalty liability)  |
| 573 51  | (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  NEWNA DR. KISSIMMEE FL. 34759  (Principal office address)   |
|   | (Principal office address)  JENNA DR. KISSMMEE FL. 34759  (Current mailing address)   |
|   |   |
| (Purpose(s) of cor  | poration authorized in home state or country to be carried out in state of Florida)   |
| Name and street addre   | ess of Florida registered agent: (P.O. Box NOT acceptable)  |
| Name:   | FAUSTINO SIMIKAMEY  |
| ice Address:  | - FAUSTINO SIMIKAMEY<br>573 SIENNA DR.  |
| k   | (City), Florida 34759 (Zip code)  |
| Registered agent's a  |   |
| gnated in this application in the same in | registered agent and to accept service of process for the above stated corporation at the p<br>ation, I hereby accept the appointment as registered agent and agree to act in this capac<br>with the provisions of all statutes relative to the proper and complete performance of my |
| ı um jamıllar with a  | and accept the obligations of my position as registered agent.  EIN#16-1730147  |
| X   | 7 2 1/1/  |
| <u>-1</u>   | (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  | Lucia de la fina  |
|---|-------------------|
| Chairman: FAUSTIND SMUKAMEY "   | <u>.</u>          |
| Address: 573 SIENNA DA.   | 25 5E) -6 A 11:46 |
| KISSIMMEFL, 34759   | Ni.               |
| Vice Chairman: FANSTINO S. McKAMEY  | MD.               |
| Address: 573 SIENNA DR  |                   |
| Kissimmer FL, 34759   |                   |
| Director: FANSTINO S, McKAMEY   |                   |
| Address: 573 Sierna Dr.   |                   |
| KISSIMMER F1, 34759   |                   |
| Director: JARDE ARROW FAINSTIND S. MUKAMEY  |                   |
| Address: 573 SIENNA Dr.   |                   |
| Lissiance Fl, 34759   |                   |
| B. OFFICERS   |                   |
| President: FAUSTINO S. MCKAMEY  |                   |
| Address: 573 SIENNA DV  |                   |
| KISSI MARCE FL, 34759   |                   |
| Vice President: FAUSTIND S. MCKAMEY   |                   |
| Address: 573 Siewa Da,  |                   |
| Kissimmer FL, 34759   |                   |
| Secretary: FAUSTINO S. McKAMEY  |                   |
| Address: 573 SIENNA DR. KISSIMMER FL, 34759   |                   |
| Treasurer: FAUSTINO S. McKAney  |                   |
| Address: 503 SIENNADA, Kissimmer FC 34759   |                   |
| 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)                 |                   |
| 14. Fanstino 5. Mckaney (Typed or printed name and capacity of person signing application)    |                   |

## SECRETARY OF STATE



#### CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, GMC GROUP, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 28, 2005, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 10, 2005.

DEAN HELLER Secretary of State

Judi

Certification Clerk