

F05000006152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400060752674

10/20/05--01015--004 **70.00

FILED
2005 OCT 20 PM 1:24
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 24 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MONROE KUT, 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:

M.T. WILEMON

(Name of Person)

MONROE KUT, INC.

(Firm/Company)

328 Hwy 145 N

(Address)

ABERDEEN, MS 39730

(City/State and Zip code)

FILED
OCT 20 PM 1:25
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

M.T. WILEMON

(Name of Person)

at (662) 369-8656

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

**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. MONROE KUT, 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. MS 3. 64-0640862
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12-17-75 5. 2074
(Date of incorporation) (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. 328 HIGHWAY 145 NORTH ABERDEEN, MS 39730
(Principal office address)

SAME
(Current mailing address)

8. INTERIOR SPECIALTIES
(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: DON G. WILKINSON

Office Address: 1666 TAYLOR RIDGE LOOP

KISSIMMEE, Florida 34744
(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.

Don G. Wilkison
(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.

FILED
2005 OCT 20 PM 1:25
TALLAHASSEE, FLORIDA
CLERK OF THE CIRCUIT COURT

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

A. DIRECTORS

Chairman: DALE R. WILEMON

Address: 328 Hwy 145 North
ABERDEEN, MS 39730

Vice Chairman: GLENDA J. WILEMON

Address: 328 Hwy 145 N
ABERDEEN, MS 39730

Director: M.T. WILEMON

Address: 20074 Box Rd
ABERDEEN, MS 39730

Director: T.S. WILEMON

Address: 20874 Adams Road
ABERDEEN, MS 39730

B. OFFICERS

President: DALE R. WILEMON

Address: _____

Vice President: M.T. WILEMON

Address: _____

Secretary: T.S. WILEMON

Address: _____

Treasurer: T.S. WILEMON

Address: _____

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

13. [Signature]

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

14. _____

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

FILED
2005 OCT 20 PM 1:25
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

State of Mississippi

Office of the Secretary of State

Eric Clark, Secretary of State
Jackson, Mississippi

FILED
2005 OCT 20 PM 1:25
JULIAN E. BUCHANAN, JR.
TALLAHASSEE, FLORIDA

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on December 17, 1975, the State of Mississippi issued a Charter/Certificate of Authority to:

MONROE-KUT, INCORPORATED

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand
and seal of office
October 13, 2005

Eric Clark

ERIC CLARK
Secretary of State