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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

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· COVER LETTER	
TO: Registration Section Division of Corporations	2008 NOW 15 AM 10: 30
SUBJECT. MIS CONSULTING TING	FOX 33
SUBJECT: MCS CONSULTING INC (Name of corporation - must inclu	de suffix)
Dear Sir or Madam:	
Dear Sir Or Madairi.	
The enclosed "Application by Foreign Corporation for Authorization "Certificate of Existence," and check are submitted to register the about transact business in Florida.	
Please return all correspondence concerning this matter to the followi	ng:
CHARENCE A. SANDS	
(Name of Person)	
CHARENCE A. SANDS (Name of Person) MCS CONSULTING INC (Firm/Company)	
(Firm/Company)	
195 MAKAR 105 DRIVE (Address) ST AUGUSTINE, FL (City/State and Zip code)	11NIT#7
(Address)	
ST ALGUSTINE FL	32080
(City/State and Zip code)	
For further information concerning this matter, please call:	
(Name of Person) (Area Code & Daytin	9530
(Name of Person) (Area Code & Daytin	ne Telephone Number)
CTTPTET/COVIDED ADDDGG	
	ILING ADDRESS: stration Section
	sion of Corporations
Clifton Building P.O.	Box 6327
	shassee, FL 32314
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Certificate of Status Certified Co	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 19, 2005

CLARENCE A. SANDS MCS CONSULTING, INC. 195 MAKARIOS DRIVE UNIT #7 ST AUGUSTINE, FL 32080

SUBJECT: MCS CONSULTING INC.

Ref. Number: W05000047801



We have received your document for MCS CONSULTING INC. and your check(s) totaling \$87.50. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 705A00063667



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 4, 2005

CLARENCE A. SANDS MCS CONSULTING, INC. 195 MAKARIOS DRIVE UNIT #7 ST AUGUSTINE, FL 32080

SUBJECT: MCS CONSULTING INC.

Ref. Number: W05000047801

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6043.

Letter Number: 405A00066185

Joey Bryan Document Specialist MOSON SEE FLORIDA

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.
O. T.
1. MC5 CONSULTING FNC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
MCS CONSULTING FNC OF GEORGIA (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. GKORGIA (State or country under the law of which it is incorporated) 3. 58-2482919 (FEI number, if applicable)
4. 7/29/99 5. PERPETUAL (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
• • • • • • • • • • • • • • • • • • • •
6ON QUALIFICATION (Date first transacted business in Florida, if prior to registration)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 195 MAKARIOS DRIVE UNIT #7 ST. AUGUSTINE FL 32080
(Principal office address)
(Principal office address) SAME
SAME (Current mailing address)
8. Cowsulting (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(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: <u>CLARENCE A. SANDS</u>
Office Address: 195 MAKARIOS DR. UNIT#7
(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.

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:

(Registered agent's signature)

A. DIRECTORS Chairman: CLARRENCE A SANDS Address: 195 MAKAPLOS DRIVE UNIT #7
ST AUGUSTINE FL 32080
Vice Chairman:
Address:
Vice Chairman: Address: Director: MARCRY W. SANDS
Address: 195 MAKARIOS DRIVE UNIT #7
ST AUGUSTINE FL 32080
Director:
Address:
B. OFFICERS
President: MARCEY W. SANDS
Address: 195 MAKARIOS DRIVE UNIT #7
ST AUGUSTINE, FL 32080
Vice President: CLARENCE A. SANDS
Address: 195 MAKARIOS DRIVE UNIT #7
ST. AUGUSTINE FL 32080
Secretary:
Treasurer:
Address:
Address.
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.
13. <u>Claience li Sando</u>
(Signature of Director or Officer listed in number 12 of the application)
14. CHARRNER A. SANDS V_PRESIDENT (Typed or printed name and capacity of person signing application)

Secretary of State Corporations Division

315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K932227
DATE INC/AUTH/FILED: 08/02/1999
JURISDICTION : GEORGIA
PRINT DATE : 10/31/2005
FORM NUMBER : 211

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MCS CONSULTING, INC. CLARENCE A. SANDS 195 MAKARIOS DR. UNIT #7 SAINT AUGUSTINE, FL 32080

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

MCS COMSULTING, INC. A GEORGÍA PROFIT CORPORATION

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.

20051031191724305



Cathy Cox Secretary of State