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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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COVER LETTER

TO: New Filing Division of	Section Corporations		
_{SUBJECT:} Sa	ccocio's Inc.		
		- must include suffix)	
Dear Sir or Madam:	•		
	ication by Foreign Corporation for A tence," and check are submitted to reg Florida.		
Please return all cor	respondence concerning this matter to	the following:	
•	Michael Saccoci	0	
	(Name of F	Person)	
	Saccocio's, Inc.		
	(Firm/Com	pany)	
	109 Arrow Street	t South	·
	(Addre	ss)	- ` .,
	Schenectady, N'	Y 12304	
	(City/State an	d Zip code)	,
For further informat	tion concerning this matter, please cal	II:	,
Michael S	accocio at 518	347-0227 ode & Daytime Telephone N	
(Name of F	Person) (Area Co	ode & Daytime Telephone N	Number)
New Filing Division of Clifton Buil	Corporations Iding Itive Center Circle	MAILING ADDR New Filing Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	ations .
Enclosed is a check	for the following amount:		
\$70.00 Filing Fee		878.75 Filing Fee &	\$87.50 Filing Fee, Certificate of Status & Certified Copy

Enclosed is form on Enclosed for FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2006

MICHAEL SACCOCIO SACCOCIO'S INC. 109 ARROW ST S SCHENECTADY, NY 12304

SUBJECT: SUNCOAST SUNROOMS, INC.

Ref. Number: W06000015354

We have received your document for SUNCOAST SUNROOMS, 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 listed in number one of the application must be identical to the name listed in the certificate of existence.

In reviewing your documents, you stated you plan to relocate to Florida permanently. Do you want to file the paperwork for foreign corporation to transact business in Florida or file Domestication of your New York corporation. Please review the enclosed paperwork for the domestication.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6855.

Tammy Hampton Document Specialist

Letter Number: 006A00021736

OF JUN -5 PN 4: 3:
DELARINGH OF STATE
DEVISION OF OPEN GRADING

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.

	CIOS INC.				
	corporation; must include "INCORPORAT corp," "lnc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
Saccocia	o's Suncoast Sunroom	c			
			adamted Conthamount of transporting has	ingg in Florida)	
New Yor	able in Florida, enter alternate corporate na	ame 3.	E7 44400E0	iness in Florida)	
	under the law of which it is incorporated)	_ 3.	(FEI number, if applicable	e) .	
01/02/20	•	5	N/A	-,	
	e of incorporation)	٠٠.	(Duration: Year corp. will cease to exist	or "perpetual")	
, N/A	•				
·			n Florida, if prior to registration)	## 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	·		502, F.S., to determine penalty liability)		
<u>109 Arro</u>	w Street South, Scher				
	(Principal office				
109 Arro	w Street South, Scher				
	(Current mailing	add	ress)		
Plan to r	permanently relocate to	\ F	I in the future		
	s) of corporation authorized in home state (
	•				
. Name and stre	et address of Florida registered agent: ((P.C	J. Box NOT acceptable)		
Name:	Michael Saccocio			CRE	
Office Address:	Michael Saccocio 4519 Mangrove Point Road				
	Bradenton		, Florida 34210 (Zip code)		
•	(City)		(Zip code)	OF STATE	
10 Pagistared a	gent's acceptance:			当	
	gent's acceptance: ned as registered agent and to accept so	ervi	ice of process for the above stated corr	poration at the place	

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.

(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: Address: _____ Director: **B. OFFICERS** President: Michael Saccocio Address: 109 Arrow Street South Schenectady, NY 12304 Vice President: Cheryl Saccocio Address: 109 Arrow Street South Schenectady, NY 12304 Secretary: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) Michael Saccocio

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SACCOCIOS INC. was filed on 01/09/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of March two thousand and six.



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