

FD6000005945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

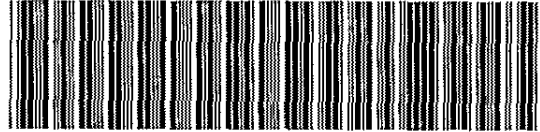
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

C.S. 9-15

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boyd Enterprises, 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:

William R. Morris, C.P.A.

William R. Morris & Associates
(Name of Person)

(Firm/Company)

2606 Broadway Ste. 2F
(Address)

Rockford, Illinois 61108-5769
(City/State and Zip code)

For further information concerning this matter, please call:

Michael Boyd
(Name of Person)

at (815) 979-2678
(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:

- ☒ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2006

WILLIAM R. MORRIS, C.P.A.
2606 BROADWAY, STE. 2F
ROCKFORD, IL 61108-5769

SUBJECT: BOYD ENTERPRISES, INC.
Ref. Number: W06000003750

We have received your document for BOYD ENTERPRISES, 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 certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 245-6047.

Carolyn Lewis
Document Specialist

Letter Number: 006A00005430



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2006

WILLIAM R. MORRIS, C.P.A.
2606 BROADWAY, STE. 2F
ROCKFORD, IL 61108-5769

SUBJECT: MACAINO MAGIC INC.
Ref. Number: W06000003750

We have received your document for MACAINO MAGIC 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):

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

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) 245-6047.

Carolyn Lewis
Document Specialist

Letter Number: 506A00052641



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2006

WILLIAM R. MORRIS, C.P.A.
2606 BROADWAY, STE. 2F
ROCKFORD, IL 61108-5769

SUBJECT: MACAINO MAGIC INC.
Ref. Number: W06000003750

RECEIVED
06 SEP 15 AM 10:15
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for MACAINO MAGIC 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 certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 245-6047.

Carolyn Lewis
Document Specialist

Letter Number: 006A00005430

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.

Boyd Enterprises, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

MACAIBS Magic Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. 68-0516129
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 2, 2002 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. January 1, 2006
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502 F.S. to determine penalty liability)

7. 5848 Meadows Edge Close Loves Park, Illinois 61111-6900
(Principal office address)

Same

(Current mailing address)

8. _____
(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: Marcy Boyd

Office Address: 17036 Terravero Circle

Fort Meyers, Florida 33908
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Marcy Boyd

(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: Michael Boyd

Address: 5848 Meadows Edge Close

Loves Park, Illinois 61111-6900

Vice Chairman: _____

Address: _____

Director: Marcy Boyd

Address: 5848 Meadows Edge Close

Loves Park, Illinois 61111-6900

Director: _____

Address: _____

B. OFFICERS

President: Michael Boyd

Address: 5848 Meadows Edge Close

Loves Park, Illinois 61111-6900

Vice President: _____

Address: _____

Secretary: Marcy Boyd

Address: 5848 Meadows Edge Close - Loves Park, Illinois 61111-6900

Treasurer: _____

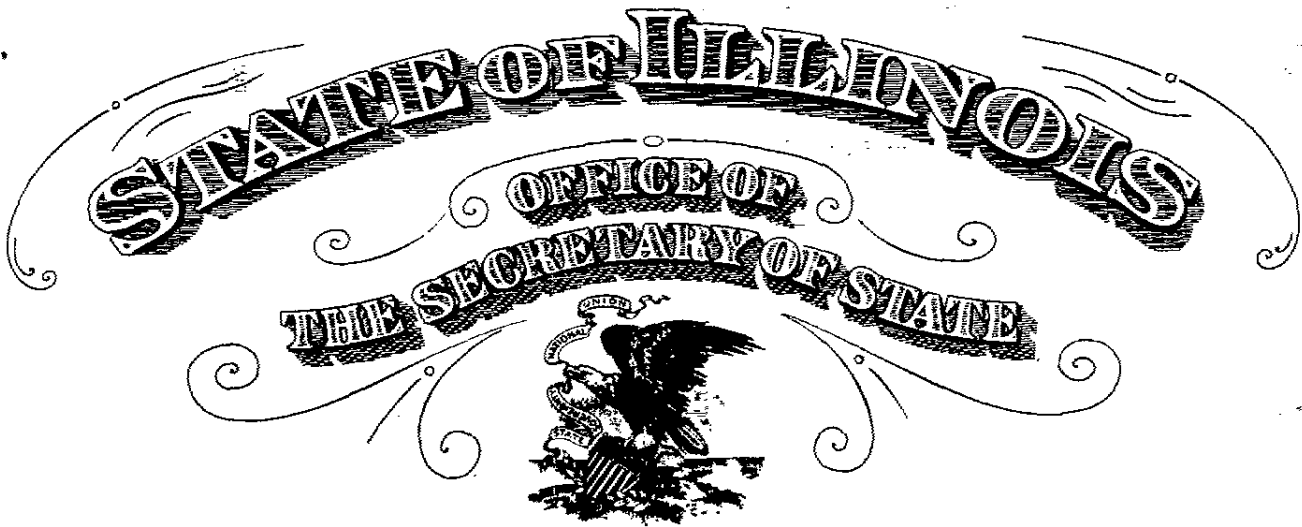
Address: _____

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

13. Michael Boyd
(Signature of Director or Officer listed in number 12 of the application)

14. Michael Boyd
(Typed or printed name and capacity of person signing application)

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06 SEP 14 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BOYD ENTERPRISES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MAY 31, 2002, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

7TH
day of SEPTEMBER A.D. 2006

Jesse White

SECRETARY OF STATE