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SECRETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Cynthia Moorekeas, 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:		
Cynthia Mobilhead, Inc.		
137 (arps) averue		
amelia Islano, Florida 32034		
(City/State and Zip code)		
For further information concerning this matter, please call:		
(Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\ \tag{\$78.75 Filing Fee & \tag{\$78.75 Filing Fee & \tag{\$87.50 Filing Fee, Certificate of Status & Certified Copy}}\$		



OF NOV -6 PH 3: 01

DEPOSITION OF STATE PROPERTY AND AND THE TELL AMASSEE, STORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2006

CYNTHIA MOOREHEAD CYNTHIA MOOREHEAD INC 737 TARPON AVENUE AMELIA ISLAND, FL 32034

SUBJECT: CYNTHIA MOOREHEAD INCORPORATED

Ref. Number: W06000047280

We have received your document for CYNTHIA MOOREHEAD INCORPORATED 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.

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 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) 245-6934.

Loria Poole Document Specialist

Letter Number: 906A00063974

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STA)WING IS SUBMITTED TO TE OF FLORIDA.
1. Cynthia Mourehean Inc	7 , ·
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORP "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ORATION,"
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose or	f transacting business in Florida)
2 FENORO 3	
	iber, if applicable)
1 1 10-	
4. (Date of incorporation) 5. (Duration: Year corp. w	rill cease to exist or "perpetual?")
6.	
(Date first transacted business in Florida, if prior to registr (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine per	
7. 137 Tarpon avenur amelia	Islano, FC 3203
737 TALON QUENCE AMOLI-	2 Islano F(3203
(Current mailing address)	2 0-310MB, C3E00
8. Peol Sales (Purpose(s) of corporation authorized in home state or country to be carried out in s	state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	, 7s 2a
Name: Cynthia Mourchad	2006 NOV
Office Address: 737 Tarpin avenue	TARY ASSE
amelia Islano, Florida 32	<u>0</u> 34 🗒 = 🛄
(City) (Zip cod	- 0RIE 3: 2
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above designated in this application, I hereby accept the appointment as registered agent further agree to comply with the provisions of all statutes relative to the proper and	ove stated corporation at the place t and agree to act in this capacity. I
and I am familiar with and accept the obligations of my position as registered agei	r compacte perjormunce of my unites, N
	and the second s
(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: 21M Vice Chairman: Address: _ 32034 FL Director: Address: Director: Address: **B. OFFICERS** 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) MOORChead

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

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CYNTHIA MOOREHEAD, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 10/10/1995 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 20th day of October, 2006

Cathy Cox Secretary of State

Certification Number: 351551-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp