

F07000003322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

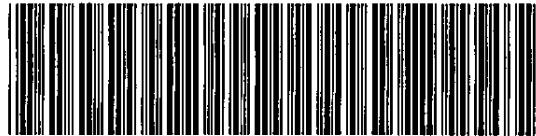
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~2007-27166~~

Office Use Only

*[Signature]*  
6/7



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06/06/07--01049--001 \*\*70.00

2007 JUN 29 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 7, 2007

GAY NICHOLS  
GAY NICHOLS ACCOUNTING  
P.O. BOX 40  
HIGHLANDVILLE, MO 65669

SUBJECT: MON FILLES INC  
Ref. Number: W07000027166

We have received your document for MON FILLES INC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 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: 707A00038910

*Good Standing Attached*

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** MON FILLES 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:

GAY NICHOLS

(Name of Person)

GAY NICHOLS ACCOUNTING

(Firm/Company)

P O BOX 40

(Address)

HIGHLANDVILLE, MO. 65669

(City/State and Zip code)

For further information concerning this matter, please call:

GAY NICHOLS

(Name of Person)

at ( 417 ) 443-3263

(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



\$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. **MON FILLES 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. **MISSOURI**

(State or country under the law of which it is incorporated)

3. **43-1881113**

(FEI number, if applicable)

4. **5/12/2000**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **6/1/2007**

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

7. **101 STATE STREET, HOLLISTER, MO. 65672**

(Principal office address)

**P O BOX 40, HIGHLANDVILLE, MO. 65669**

(Current mailing address)

8. **MOTEL**

(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: **C L CARR JR**

Office Address: **258 SOUTH HWY 79**

**PANAMA CITY BEACH**

(City)


, Florida **32413**

(Zip code)

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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.*

  
(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: C L CARR JR

Address: 101 STATE STREET  
HOLLISTER, MO. 65672

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: C L CARR JR

Address: 101 STATE STREET  
HOLLISTER, MO. 65672

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_


Secretary: C L CARR JR

Address: 101 STATE STREET, HOLLISTER, MO. 65672

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

14. C L CARR JR  
(Typed or printed name and capacity of person signing application)

# STATE OF MISSOURI



Robin Carnahan  
Secretary of State

**CORPORATION DIVISION  
CERTIFICATE OF GOOD STANDING**

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

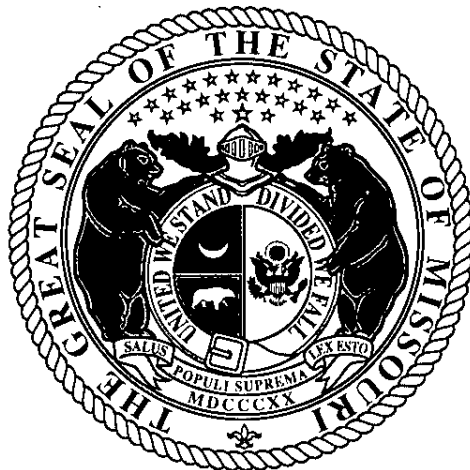
**MON FILLES, INC.  
00478829**

was created under the laws of this State on the 13th day of January, 2000, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 12th day of June, 2007

A handwritten signature in cursive script that reads "Robin Carnahan".

Secretary of State



Certification Number: 9793971-1 Reference:  
Verify this certificate online at <http://www.sos.mo.gov/businessentity/verification>