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(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
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## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: MILADO, INC		
(Name of	corporation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corpor "Certificate of Existence," and check are substransact business in Florida.		
Please return all correspondence concerning t	this matter to the following:	
WAYNE MILLER		· ·
	(Name of Person)	ALL SECOND
MILADO, INC		
	(Firm/Company)	ARY SSS
220 NM 35 11 H	LACE	mon D
220 NW 35TH PO CAPE CORAL, FL	(Address) 33993	II: 57
(C	City/State and Zip code)	
For further information concerning this matte	•	
(Name of Person) at (	(239) 282-0167	
(Name of Person)	(Area Code & Daytime Telephone Nur	nber)
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 Corporation P.O. Box 6327 Tallahassee, FL 3231	ons
Enclosed is a check for the following amount	:	
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of St	atus Certified Copy C	7.50 Filing Fee, lertificate of Status & lertified 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. MILAGO 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) MARY CAND
(State or country under the law of which it is incorporated)

5-1-1990
(Date of incorporation)

3. 52-1680951
(FEI number, if applicable)

DERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 220 NW 35TH PLACE CAPE COPAL FL 33993
(Principal office address) 220 NW 35TH PLACE CAPE COVAL FZ 33993
(Current mailing address) (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: Office Address: 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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_ Address: \_\_\_ Vice Chairman: Address: Director: Address: \_\_\_\_ Director: Address: **B. OFFICERS** President: GENERA MILLER Secretary: PLACE CAPE COMAL, FL 33993 Address: 220-NU 35TH Treasurer: WAYNE MILLER 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) 14. WAYNE MILLER, VP, SECTREAS
(Typed or printed name and capacity of person signing application)

## STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO CORPORATIONS , OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ACCORDING TO THE RECORDS OF THIS DEPARTMENT MILADO, INC. FILED ITS ARTICLES OF INCORPORATION, WHICH HAVING BEEN RECEIVED AND APPROVED FOR RECORD BY THIS DEPARTMENT ON MAY 01, 1990.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 27, 2007.

Paul B. Anderson Charter Division

Fal B. Undan



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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