

F07000004933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

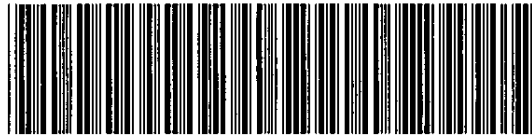
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

25.10-4

## COVER LETTER

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

**SUBJECT:** Altamonte Consulting Group, 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:

Karime Alvarado

(Name of Person)

Altamonte Consulting Group, Inc.

(Firm/Company)

374 Springdale Drive

(Address)

Altamonte Springs, FL 32714

(City/State and Zip code)

For further information concerning this matter, please call:

Karime Alvarado

(Name of Person)

at ( 321 ) 356-6650

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 17, 2007

KARIME ALVARADO  
ALTAMONTE CONSULTING GROUP INC.  
374 SPRINGDALE DR.  
ALTAMONTE SPRINGS, FL 32714

SUBJECT: ALTAMONTE CONSULTING GROUP, INC.  
Ref. Number: W07000045860

We have received your document for ALTAMONTE CONSULTING GROUP, 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):

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: 107A00054706

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

07 OCT -4 AM 10:51

RECEIVED

**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.

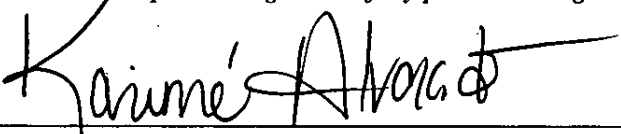
1. Altamonte Consulting Group, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Nevada 3. 26-0731409  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 16, 2007 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 374 Springdale Drive, Altamonte Springs, FL 32714  
(Principal office address)
- 374 Springdale Drive, Altamonte Springs, FL 32714  
(Current mailing address)

8. Consulting Service  
(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: Karime Alvarado
- Office Address: 374 Springdale Drive  
Altamonte Springs, Florida 32714  
(City) (Zip code)

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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: Karime Alvarado

Address: 374 Springdale Drive  
Altamonte Springs, FL 32714

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

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

Director: Karime Alvarado

Address: 374 Springdale Drive  
Altamonte Springs, FL 32714

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

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

**B. OFFICERS**

President: Karime Alvarado

Address: 374 Springdale Drive  
Altamonte Springs, FL 32714

Vice President: Karime Alvarado

Address: 374 Springdale Drive  
Altamonte Springs, FL 32714

Secretary: Karime Alvarado

Address: 374 Springdale Drive, Altamonte Springs, FL 32714

Treasurer: Karime Alvarado

Address: 374 Springdale Drive, Altamonte Springs, FL 32714

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

13. Karime Alvarado

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

14. Karime Alvarado, Sole Officer and Director

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE (INCLUDING AMENDMENTS)

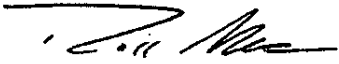
I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ALTAMONTE CONSULTING GROUP, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 16, 2007, and is in good standing in this state.

I further certify, that the above corporation has Articles of Incorporation and no amendments on file in this office as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 1, 2007.



  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20071001-1387  
You may verify this electronic certificate  
online at <http://secretaryofstate.biz/>