

## Florida Department of State

Division of Corporations Public Access System

#### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000248350 3)))



H070002489503ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195

Phone

: (850)521-1000

Fax Number

: (850)558-1575

### FOREIGN PROFIT/NONPROFIT CORPORATION

HOUSING STUDIO, P.A.

Certificate of Status	1
Certified Copy	0
Page Count	<b>9</b> 5
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

10/5/2007

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

PAGE 001/001 FloridNO 873t cp 2tate

SECRETARY OF STATE JIVISION OF CORPORATIONS

07 OCT -5 PH 12: 39



October 8, 2007

FLORIDA DEPARTMENT OF STATE Division of Corporations

CORPORATION SERVICE COMPANY

SUBJECT: HOUSING STUDIO, P.A.

REF: W07000049689

Please give original submission date as find ...

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

The only acceptable suffix for a foreign professional corporation is { P.C.) Please make the necessary changes in the appropriate places and retugn for processing.

If you have any further questions concerning your document, please call (850) 245-6934.

Loria Poole Regulatory Specialist II New Filing Section

FAX Aud. #: H07000248350 Letter Number: 207A00058818

P.O BOX 6327 - Tallahassee, Florida 32314

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

BUSINESS IN FLORIDA		
IN COMPLIANCE WITH SECTION 607.1503, PLOBIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A BOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.		
1. Housing Studio, P. P. (Enternance of corporation; most include "INCORPORATED," "COMPANY," "CORPORATION,"		ē
"Inc.," "Co.," "Corp." "Inc." "Co." ox "Corp.")		
(If name imagailable in Florida, onter alternate Exposure name adopted for the purpose of transacting business in Florida)		
2. Nov Ha Cavolina.  (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (FEI number, if applicable)		
1 2/25/1997 5. Perpetual		
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")  6. NA		
(Date first transacted business in Florida, if prior to registration) (SEB SECTIONS 607.1501 & 607.1502, F.S., to determine penalty Hability)		
7. 500 East Boulevayd. Charlotte, NC 28203		
Saluse (Current mailing address)	0.	SIAIC 3S
8. Architectural services	07 OCT	SION O
(Purpose(s) of corporation suthorized 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)	4	5 A
Name Corporation Service Company	JI HO	TPOS STOS
Office Address 1201 Hays Street	PH 12: 39	RATIO
Tallaha 16ce , Florida 8230 / (City) (Zip code)	_	SE
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the pl	lace	
designated in this application. I hereby accept the appointment as registered agent and agree to act in this capaci further agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.	ty. I	
Amanda Roath As its 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	
Cinetropas:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Directors	ر خ م
Address:	
	三名
R. OFFICERS	日本で 一
Propident: Charles L. Trans, 11	
Address: 17805 Mollypop Lane	ST/S
Cornelius, NC 88031	TE TE
Vice President David F. Furman	<del>ड</del>
Address: 435 South Tryon Street; Unit 907	
Charlotte, NC 28202	
Searchary: David F Furman	
Address	
Treasurer: Chowles C. Trowis, 111	
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. Charles C. Travis, 111	
(Typed or printed name and espacity of person signing application)	



# NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (PROFESSIONAL CORPORATION)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### HOUSING STUDIO, P.A.

is a professional corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 25th day of February, 1997, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that the said corporation's certificate of registration is not suspended or revoked by their licensing board; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

SECRE LACY OF STATE ON SIVISION OF CURPORATIONS

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 4th day of October, 2007.

Elaine I. Marshall

Secretary of State

Certification# 870618 3-1 Reference# 8771437-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.ne.us/verification