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1/16/08

COVER LETTER

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DIVISION OF CORPORATIONS

08 JAN 16 PM 4:48

TO: New Filing Section
Division of Corporations

SUBJECT: Prime Design 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:

Dennis W. Pollard

(Name of Person)

Prime Design Inc

(Firm/Company)

106 Harmon Drive

(Address)

Blackwood, NJ 08012

(City/State and Zip code)

For further information concerning this matter, please call:

William J. Coyle

(Name of Person)

at (856) 228-0001

(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

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December 26, 2007

DENNIS W. POLLARD
106 HARMON DRIVE
BLACKWOOD, NJ 08012

SUBJECT: PRIME MILLWORK INC.
Ref. Number: W07000061922

We have received your document for PRIME MILLWORK 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):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 907A00071514

**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. **Prime Design Inc**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

~~Prime Millwork Inc.~~ PRIME DESIGN SOUTH, INC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **New Jersey**

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

3. **22-3343245**

(FEI number, if applicable)

4. **January 1, 1995**

(Date of incorporation)

5. **PERPETUAL**

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

6. _____
(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **106 Harmon Drive, Blackwood, NJ 08012**

(Principal office address)

106 Harmon Drive, Blackwood, NJ 08012

(Current mailing address)

8. **Custom Cabinetry & Millwork**

(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: Melody Ruehle

Office Address: 1830 2nd Avenue North

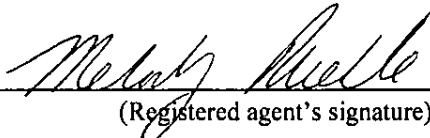
Lake Worth, , Florida 33460

(City)

(Zip code)

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

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Chairman: Dennis W. Pollard

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Address: 106 Harmon Drive
Blackwood, NJ 08012

Vice Chairman: Ronald Pollard

Address: 106 Harmon Drive
Blackwood, NJ 08012

Director: None

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Ronald Pollard

Address: 106 Harmon Drive
Blackwood, NJ 08012

Vice President: Maureen Pollard

Address: 106 Harmon Drive
Blackwood, NJ 08012

Secretary: Ronald Pollard

Address: 106 Harmon Drive, Blackwood, NJ 08012

Treasurer: Dennis W. Pollard

Address: 106 Harmon Drive, Blackwood, NJ 08012

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

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

14. Dennis W. Pollard, CEO
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING**

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PRIME DESIGN INC.

0100610980

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on December 29, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Ronald Pollard
106 Harmon Dr
Blackwood, NJ 08012*



Certification# 111408399

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
17th day of December, 2007*

A handwritten signature in cursive script, appearing to read "Michellene Davis".

*Michellene Davis
Acting State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp