

FD8000003400

(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:

Office Use Only



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07/24/08--01023--009 \*\*128.75

8/1/08  
100-35014  
7/2/08



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 24, 2008

STACY CARTER  
3149 SE 2ND DRIVE  
HOMESTEAD, FL 33033

SUBJECT: DESIGNS BY STACY, INC.  
Ref. Number: W08000035014

We have received your document for DESIGNS BY STACY, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II  
New Filing Section

Letter Number: 408A00043018

TO: Suzanne Hawkes  
Letter Number 408A00043018

Hello Suzanne,

Here is my new Foreign Form.

I will be doing this instead of Domestication

You have my Check & certificate. Can  
you please apply the \$70.<sup>00</sup> and send me  
back the remainder.

Thank You for your help,

Stacy Carter  
Designs by Stacy  
207-513-1151

RECEIVED  
08 AUG -4 AM 8:00  
FBI/DOJ BY ECH/STACY

## COVER LETTER

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

**SUBJECT:** Designs by Stacy 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:

Stacy Carter  
(Name of Person)  
Designs by Stacy Inc.  
(Firm/Company)  
3149 SE 2<sup>ND</sup> DR.  
(Address)  
Homestead, FL 33033  
(City/State and Zip code)

For further information concerning this matter, please call:

Stacy Carter at ( 207 ) 513-1151  
(Name of Person) (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. Designs by Stacy Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Designs by Stacy4 Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Maine 3. 20-5187267  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/1/2006 5. \_\_\_\_\_  
(Date of incorporation) (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. 3149 SE 2<sup>nd</sup> Drive Homestead, FL 33033  
(Principal office address)

3149 SE 2<sup>nd</sup> Drive Homestead, FL 33033  
(Current mailing address)

8. Graphic Design  
(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: Stacy Carter

Office Address: 3149 SE 2<sup>nd</sup> Dr.

Homestead, Florida 33033  
(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.*

Stacy Carter  
(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: \_\_\_\_\_

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

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

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

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

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

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

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

**B. OFFICERS**

President: Stacy Carter

Address: 3149 SE 2<sup>ND</sup> Dr.

Homestead, FL 33033

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

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

Secretary: \_\_\_\_\_

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

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

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

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

13. Stacy Carter

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

14. Stacy Carter President

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

# State of Maine



## Department of the Secretary of State

***I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of organization, amendment and dissolution of corporations and annual reports filed by the same.***

***I further certify that DESIGNS BY STACY INC is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is September 22, 2006.***

***I further certify that on:***

*September 22, 2006 ARTICLES OF INCORPORATION were filed.*

*No further amendments have been filed to date.*

***I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.***

***In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this fourteenth day of February 2008.***



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**MATTHEW DUNLAP**

***Secretary of State***