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(Re	equestor's Name)		
(Ac	ddress)		
(Ac	ddress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	s Certificates of Status		
Special Instructions to Filing Officer:			
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SECRETARY OF STATE TAIL AHASSEE, FLORIDA

T. BUTON AUG 4 2008

COVER LETTER

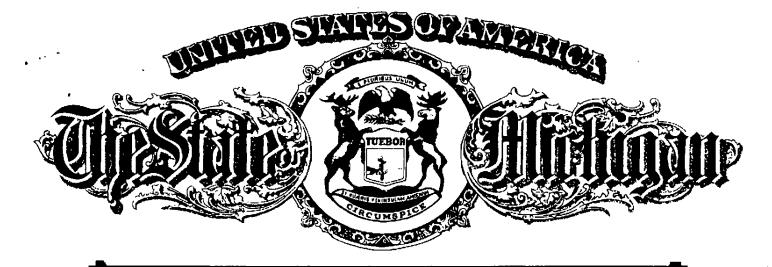
TO: New Filing Section Division of Corporations	·
	aint (Ren)
	oration - must include suffix)
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," ad to register the above referenced foreign corporation to
Please return all correspondence concerning this	natter to the following:
Robert Ci	LR.
(Né	me of Person)
The tai	nt CREW
(Fir	m/Company)
30 Euche ave	nue_
B	(Address) 34 pc 2 pag
<u>Englewood</u>	4 34223
City/s	State and Zip code)
For further information concerning this matter, ple	ease call:
Robert Cua.	41 , 7110-4011
(Name of Person) at (9)	Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

The second secon		
	AG -	
1. Cyp. Inc.	+ [
(Enter name of corporation; must include "INOORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	P	U
The Paint Crew, Inc.	ų: 29	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
2. Michia and 3. 20-3002693 (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. Prophic (Duration: Year corp. will cease to exist or "perpetual")		
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6. Date of Registration		
(Date first transacted business in Florida, if prior to registration)		
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. 30 Eurlid Avenue Englewood, 71 34223 (Principal office address)		
30 Eurlia Allana Englasiana H 311223		
30 Euchd Avenue Englewood, 7t 34223 (Current mailing address)		
(on the same state)		
8. Kesidential and commercial painting		
(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: Robert Cyr		
Office Address: 30 Enclid Arense		
Englewood, Florida 34223 (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 placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacifurther agree to comply with the provisions of all statutes relative to the proper and complete performance of my	ity. I	
and I am familiar with and accept the fobligations 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:	
Address:	
	55
Vice Chairman:	
	<u> </u>
Address:	# 29
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Robert Cyl Address: 30 Euclid Arenve, Englewood, 7L 34223	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Äddress:	
NOTE: If necessary, you may be tach an addendum to the application listing additional officers and/or of the second secon	directors.
(Signature of Director or Officer listed in number 12 of the application)	
14. Robert Cyr	
(Typed or printed name and capacity of person signing application)	



Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

CYR, INC.

a Michigan profit corporation was validly incorporated on January 31, 2005, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 8th day of May, 2008.

Director

Bureau of Commercial Services