

•
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PICK-UP WAIT MAIL

(Business Entity Name)
(Document Number)
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09/05/08--01034--008 **87.50



9/8/

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: A & M Gift Exc	hange, Inc.		
	f corporation - must include suffix)		
Dear Sir or Madam:			
	oration for Authorization to Transact Business in Florida," bmitted to register the above referenced foreign corporation to		
Please return all correspondence concerning	this matter to the following:		
Peter M. Lopez,	Esq.		
	(Name of Person)		
Peter M. Lopez,	P.A.		
	(Firm/Company)		
1911 NW 150th A	ve. #201		
	(Address)		
Pembroke Pines,	FL 33028		
((City/State and Zip code)		
For further information concerning this mate	ter, please call:		
Peter M. Lopez at (954) 436-6111			
(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	nt:		
\$70.00 Filing Fee \$78.75 Filing For Certificate of			

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.

(Enter name of c	Gift Exchange, Ir orporation; must include "INCO orp," "Inc," "Co," or "Corp.")	nc. PRPORATED," "	COMPANY," "CORPORATI	ON,"	_
(If name unavail	able in Florida, enter alternate co	orporate name ado	pted for the purpose of transac	ting business in Florida	-
a Wannagg		_	61 1525004		
2. Tennesse (State or country	under the law of which it is inco	3	61-1525084 (FEI number, if a	pplicable)	
			•	ppeuc.c)	
4. March 26	of incorporation)	5	uration: Year corp. will cease	to exist or "nemetual"	_
(240	or meorporation)	(L	diamon, real corp. will cease	, to exist of perpetual y	'
6	September (Data first transca	3, 2008	orida, if prior to registration)		_
			F.S., to determine penalty liab	oility)	
7.	4810 SW 198th Ter		• •	•	
		pal office address			_
	4810 SW 198th Ter (Curren	Southwent mailing address	st Ranches, FL 3	. ــــ ننش	-
(Purpose(s) of corporation authorized in ho	ome state or countr	ry to be carried out in state of I		
9. Name and stree	t address of Florida registered	d agent; (P.O. B	ox <u>NOT</u> acceptable)		
Name:	<u>Rosa Quintana</u>		_		
Office Address:	4810 SW 198th T	er.	_	12: 50	-
	Southwest Ranch	ies	, Florida 33332		
	(City)		(Zip code)		
Having been nam designated in this further agree to co	gent's acceptance: ed as registered agent and to application, I hereby accept omply with the provisions of with and accept the obligation (Registered agen	the appointment all statutes relations of my position	as registered agent and agive to the proper and compl	ree to act in this capa	acity. I
•	· - 0	// ·			

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: Rosa M. Quintana	
Address: 4810 SW 198th Ter.	
Southwest Ranches, FL 33332	
Director: Maria A. Zabaleta	
Address: 4810 SW 198th Ter.	3 8
Southwest Ranches, FL 33332	CO CONTROL CONTROL
B. OFFICERS	
President: Rosa M. Quintana	10 10 10 10 10 10 10 10 10 10 10 10 10 1
Address:4810_SW_198th_Ter	Tally from the second of the s
Southwest Ranches, FL 33332	50
Vice President:	
Address:	
Secretary: <u>Maria A. Zabaleta</u>	
Address: 4810 SW 198th Ter.	
Treasurer: Southwest Ranches, FL 33332	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and/or directors.
13	
(Signature of Director or Officer listed in number 12 of th	e application)
14. Kosa M. Quin lana (Typed or printed name and capacity of person signing a	annlication)

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 08/27/2008
REQUEST NUMBER: 08240521
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/26/2007 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0544847 JURISDICTION: TENNESSEE

TO: PETER M LOPEZ PA 1911 NW 150TH AVE STE 201 PEMBROKE PINES, FL 33028 REQUESTED BY:
PETER M LOPEZ PA
1911 NW 150TH AVE
STE 201
PEMBROKE PINES, FL 33028

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"A & M GIFT EXCHANGE, INC"

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED



FOR: REQUEST FOR CERTIFICATE

PEMBROKE PINES, FL 33028-2871

ON DATE: 08/27/08

FEES

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00004469203 ACCOUNT NUMBER: 00610180

AGRICULTURE H

FROM:

PETER M LOPEZ, PA

1911 NW 150 AVE STE 201

> RILEY C. DARNELL SECRETARY OF STATE

\$5.4458