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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

**SUBJECT:** ALFA BUILDERS, 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:

JAMES DAVIS

(Name of Person)

UNITED CRS, INC

(Firm/Company)

327 HOLLOW CREEK LN

(Address)

HAVANA, FL 32333

(City/State and Zip code)

For further information concerning this matter, please call:

JAMES DAVIS

(Name of Person)

at ( 850 ) 539-8000

(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. **ALFA BUILDERS, INC**

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

**ALFA BUILDERS OF ALABAMA, INC**

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

2. **ALABAMA**

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

3. **63-0734294**

(FEI number, if applicable)

4. **08/26/1977**

(Date of incorporation)

5. **PERPETUAL**

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

6. **UPON REGISTRATION**

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

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

7. **8191 SEATON PLACE, MONTGOMERY, AL 36116**

(Principal office address)

**8191 SEATON PLACE, MONTGOMERY, AL 36116**

(Current mailing address)

8. **ANY AND ALL LAWFUL BUSINESS**

(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: **UNITED CRS, LLC**

Office Address: **327 HOLLOW CREEK LN**

**HAVANA**

(City)

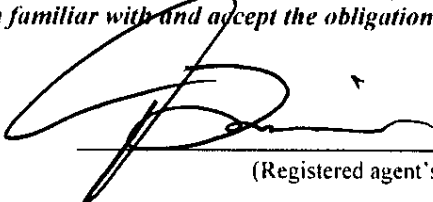
, Florida **32333**

(Zip code)

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DEPARTMENT OF STATE  
ALBANY, ALABAMA

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.

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

**A. DIRECTORS**

Chairman: ALFA PROPERTIES, INC

Address: 8191 SEATON PLACE  
MONTGOMERY, AL 36116

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

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

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

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

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

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

**B. OFFICERS**

President: KEVIN L. KETZLER

Address: 8191 SEATON PLACE  
MONTGOMERY, AL 36116

Vice President: J. MARK FAIN

Address: 8191 SEATON PLACE  
MONTGOMERY, AL 36116

Secretary: ANGELA CONNER

Address: 8191 SEATON PLACE  
MONTGOMERY, AL 36116

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

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

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

13. Kevin L. Ketzler  
(Signature of Director or Officer listed in number 12 of the application)

14. Kevin L. Ketzler, President  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Beth Chapman  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Alfa Builders, Inc. incorporated in Montgomery County, Montgomery, Alabama on August 26, 1977. I further certify that the records do not disclose that said Alfa Builders, Inc. has been dissolved.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

November 25, 2008

Date

*Beth Chapman*

Beth Chapman

Secretary of State