900000087

(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:			
·			
-6462			

Office Use Only



100142977651

02/09/09--01056--006 **70.00



DEPARTMENT OF STATE

09 MAR -3 AM 11: 16

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2009

CARLTON REYES GEMITA INC 161 VILLAGE EAST DRIVE LOS FRESNOS, TX 78566

SUBJECT: GEMITA INC Ref. Number: W09000006462

We have received your document for GEMITA INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 309A00004738

COVER LETTER

SUBJECT: JEMITA, I	We.	
(Name of c	orporation - must include suffix)	
Dear Sir or Madam:		
	ation for Authorization to Transact Business in Florida," nitted to register the above referenced foreign corporation t	
Please pettip all correspondence concerning th	is matter to the following:	
CARLTON REGES		
	Name of Person)	
LOS FRESNOS, TX	Firm/Company)	
	Firm/Company)	
161 VILLAGE EAST	DRIVE	
	(Address)	
LOS FRESNOS TX	18566	
(Ci	ty/State and Zip code)	
For further information concerning this matter,	please call:	
Q_{2} . Q		
Name of Person) at (_	956) 233-4134 - (956) 512-196 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daylime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section Division of Corporations	New Filing Section	
Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tatlahassee, FL 32314	
	·	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of State		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of corpora	N CORPORATION TO TRANS JUC. Mion; must include "INCORPOR "Inc," "Co," or "Corp.")			
(If name unavailable in	Florida, enter alternate corporate The law of which it is incorporate	te name adopted i	or the purpose of transactin	g business in Florida)
(State or country under	the law of which it is incorporate	ed)	PERETURE	icable)
(Date of inc	23, 1992 corporation)		on: Year corp. will cease to	exist or "perpetual")
	(Date first transacted bu (SEE SECTIONS 607.1501 &			ty)
2020 Bay 161 VIIIAge To Denices	(Principal of DRIVE) (Current mail FREEZE, STORE	fice address) LOS FR ling address) AND CAR	18521 CESNOS, TX	78566 00 01 01hee ma
Products (Purpose(s) of co	And to Sell The opporation authorized in home sta	e SANTE	EITher AT who	poksale or AT Rei
Name and street add	ress of Florida registered ager	nt: (P.O. Box <u>N</u>	OT acceptable)	
Name:	Robert C. Cochi	M		200 TAL
Tice Address:	008 FAY Dr			9 MA CRE: CAH
	Mary Esther (City)	, F	orida <u>32569</u> (Zip code)	R-3 RARY CASSEE
). Registered agent's aving been named as signated in this appli rther agree to comply	s acceptance: registered agent and to acceptation, I hereby accept the approximation of all standard accept the obligations of	pt service of pro ppointment as r ututes relative to	cess for the above stated egistered agent and agre the proper and complet	e to acifin this copacity. I
	(Registered agent's sig	an .		

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: (ARLTON KEGES
Address: 161 VIIIAGE EAST DRIVE
LOS FRESNOS, 7x 78576
Vice Chairman: Eufen in Reyes
Address: 161 VII/Age EAST DRIVE
LOS FRESNOS, TX 78566
Director:
Address:
Director:
Address:
B. OFFICERS
President: ARITON RECIES
Address: 161 Usllage GIST DRUIE
LOS FRESNOS, TX 78566
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 The start of the start and addendant to the application listing additional officers and/of directors.
(Signature of Director of Officer listed in number 12 of the application)
14. ARLTON KEYES PRESIDENT
(Typed or printed name and capacity of person signing application)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



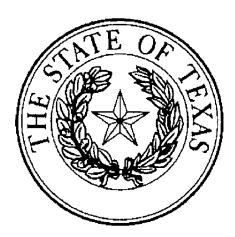
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for GEMITA, INC. (file number 122535700), a Domestic For-Profit Corporation, was filed in this office on March 23, 1992.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 17, 2009.



Hope Andrade Secretary of State