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ORPORATION NAME(S) & I		
H.O.M.E.S. (Corporation Name)	Construction	n Inc.
(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up ti	me	Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy	☐ Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
Profit	☐ Amendment	
Not for Profit	Resignation of	R.A., Officer/Director
Limited Liability Domestication	Change of Rep Dissolution/W	
Other	Merger Merger	
OTHER FILINGS	REGISTRATION	/QUALIFICATION
Annual Report	Foreign	
Fictitious Name	Limited Partne Reinstatement	
	Trademark	
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2E031(7/97)	- 1	Examiner's Initials

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	ONSTRUCTION INC. corporation; must include "INCORPORAT	ED	" "COMPANY " "COPPOPATIONI"			-
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")	IJD,	COMPANT, CORPORATION,			
	ONSTRUCTION & IMPROVEMENTS I					_
(If name unavai	lable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting bu	siness in F	Florida)	
2. NEVADA		_ 3.	20-3443070			_
(State or country	under the law of which it is incorporated)		(FEI number, if applicab	le)		
4. 09/07/2005		5.	PERPETUAL			_
(Date	e of incorporation)		(Duration: Year corp. will cease to exis	t or "perp	etual")	
6. UPON FILING						_
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
72327 West 66th	Place, Hialeah, Florida 33016					
	(Principal office	add	ress)			-
2327 West 66tl	h Place, Hialeah, Florida 33016					
	(Current mailing	add	ress)			-
 . •				_		
	y legal business permitted under the law s) of corporation authorized in home state of					-
			,	: : :	~~	
9. Name and street	et address of Florida registered agent: ((P.C	D. Box <u>NOT</u> acceptable)	· · · · ·	9	
Name:	SPIEGEL & UTRERA, P.A.					1 3
				22 (4)	.c.s	
Office Address.	1840 SW 22nd Street, 4th Floor			SELASSI AHASSI	1- YWH 60	er etg reta e ergentys e
Office Address:	1840 SW 22nd Street, 4th Floor			AHASSEE.		A STANSON
Office Address:	Miami		, Florida <u>33145</u>	RETARY OF ST AHASSEE, FLO		
Office Address:			, Florida <u>33145</u> (Zip code)	AHASSEE, FLORID	4Y - 1 AM 10: 56	
10. Registered a	Miami (City) gent's acceptance:		(Zip code)	STATE LORIDA	I AM 10: 56	Townson or the second
10. Registered a	Miami (City) gent's acceptance: ned as registered agent and to accept se	ervic	(Zip code) ce of process for the above stated corp	STATE LORIDA poration	AM 10: 56	place
10. Registered a Having been nam designated in this further agree to c	Miami (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoin	ntn es re	(Zip code) ce of process for the above stated corp nent as registered agent and agree to be elative to the proper and complete per	STATE LORIDA poration of act in this	AMIO: 56	place
10. Registered a Having been nam designated in this further agree to c	Miami (City) gent's acceptance: ned as registered agent and to accept se	ntn es re	(Zip code) ce of process for the above stated corp nent as registered agent and agree to be elative to the proper and complete per	STATE LORIDA poration of act in this	AMIO: 56	place
10. Registered a Having been nam designated in this further agree to c	Miami (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoin	ntn es re	(Zip code) ce of process for the above stated corp nent as registered agent and agree to be elative to the proper and complete per	STATE LORIDA poration of act in this	AMIO: 56	place
10. Registered a Having been nam designated in this further agree to c	Miami (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoin	ntn es re	(Zip code) ce of process for the above stated corp nent as registered agent and agree to be elative to the proper and complete per	STATE LORIDA poration of act in this	AMIO: 56	place

- 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: Marcelo Gamarra Address: 2327 West 66th Place Hialeah, Florida 33016 Vice Chairman: Director: __ Address: ___ Address: _ į **B. OFFICERS** d d President: Marcelo Gamarra Address: 2327 West 66th Place Hialeah, Florida 33016 Vice President: Address: _ Marcelo Gamarra Secretary: Address: 2327 West 66th Place, Hialeah, Florida 33016 Treasurer: Marcelo Gamarra Address: 2327 West 66th Place, Hialeah, Florida 33016 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Marcelo Damana (Signature of Director or Officer listed in number 12 of the application) 14. Marcelo Gamarra, President (Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, H.O.M.E.S. CONSTRUCTION INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 7, 2005, and is in good standing in this state.



Certified By: Christine Rakow Certificate Number: C20090408-1226 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 14, 2009.

ROSS MILLER Secretary of State

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