

F09000003976

(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:

Office Use Only



300160813893

09/21/09--01038--007 \*\*78.75

FILED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 SEP 30 P 3:11

**COVER LETTER**

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

**SUBJECT:**

P M Siding Corp  
(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:

Michelle Sweatt

(Name of Person)

BUSINESS SUPPORT, INC.

(Firm/Company)

417 STOWE AVE, SUITE A

(Address)

ORANGE PARK, FL 32073

(City/State and Zip code)

For further information concerning this matter, please call:

Michelle Sweatt at

(Name of Person)

904 , 264-1289

(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

FILED  
2009 SEP 30 P 3 11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 22, 2009

MICHELLE SWEATT  
BUSINESS SUPPORT, INC.  
417 STOWE AVE, SUITE A  
ORANGE PARK, FL 32073

SUBJECT: PM SIDING CORP.  
Ref. Number: W09000042497

We have received your document for PM SIDING CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Date of incorporation must be same as Certificate of Existence.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White  
Regulatory Specialist II

Letter Number: 609A00031080

→ Please see attached, w/ correction.

RECEIVED  
09 SEP 30 AM 11:07  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

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

2. FERNANDES Custom Homes  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

3. New Jersey 3. 22-3844018  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/28/01 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 159 Grafton Ave Newark NJ 07104  
(Principal office address)

10337 Fairchild Rd Spring Hill, FL 34608  
(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: Ana Fernandes

Office Address: 10337 Fairchild Rd

Spring Hill, Florida 34608  
(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 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.

FILED  
SEP 30 P 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

## A. DIRECTORS

Chairman:

Ana Fernandes

Address:

159 Grafton Ave  
Newark NJ, 07104

Vice Chairman:

(same)

Address:

Director:

(same)

Address:

Director:

Address:

## B. OFFICERS

President:

Ana Fernandes

Address:

159 Grafton Ave  
Newark NJ 07104

Vice President:

(same)

Address:

Secretary:

(same)

Address:

Treasurer:

(same)

Address:

FILED  
2009 SEP 30 P 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

13.

(Signature of Director or Officer listed in number 12 of the application)

14.

Ana Fernandes  
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING**

**PM SIDING CORP.**

0100865545

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on November 28, 2001.*

*As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):*

2008

*I further certify that the registered agent and registered office are:*

*Ana F Fernandes  
159 Grafton Ave  
Newark, NJ 07104*

**FILED**  
2009 SEP 30 P 3 11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Certification# 115298576

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
15th day of September, 2009*

*R. David Rousseau  
State Treasurer*

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)