

F09 000004209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

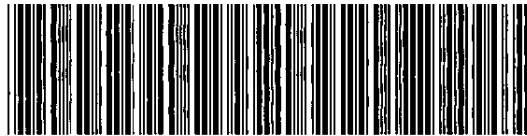
(Document Number)

Certified Copies _____

Certificates of Status _____

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10/12/09--01017--001 **78.75

W09-4559M

FILED

2009 OCT 23 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-27-09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AJ Williams Solution, 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," or "Certificate of Good Standing" 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:

W Alan Williams

Name of Person

AJ Williams Solution, Inc.

Firm/Company

6951 NW 45 Terrace

Address

Coconut Creek, FL 33073

City/State and Zip code

support@homeh2ofilters.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel L Bertucelli

at (954) 580-0880

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:

☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Cop ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2009

W ALAN WILLIAMS
6951 NW 45 TERRACE
COCONUT CREEK, FL 33073

SUBJECT: AJ WILLIAMS SOLUTION, INC.
Ref. Number: W09000045594

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6928.

Tim Burch
Regulatory Specialist II

Letter Number: 909A00032828

RECEIVED
09 OCT 23 AM 10:36
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 OCT 23 PM 4:30

FILED

1. AJ Williams Solution, Inc.

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

AJW Products, Inc.

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

2. Wyoming

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

3. 26-2578828

(FEI number, if applicable)

4. 05/09/2008

(Date of incorporation)

5. perpetual

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

6. October 1, 2009

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

7. 6951 NW 45 Terrace, Coconut Creek, FL 33073

(Principal office address)

6951 NW 45 Terrace, Coconut Creek, FL 33073

(Current mailing address)

8. Sales of Products to consumers. Any and all legal purposes.

(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: W Alan Williams

Office Address: 6951 NW 45 Terrace

Coconut Creek, Florida 33073

(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.

W. Alan Williams

(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

2009 OCT 23 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: W Alan Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073

Vice Chairman: Judith Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: W Alan Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073

Vice President: Judith Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073


Secretary: Judith Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073

Treasurer: Judith Williams

Address: 6951 NW 45 Terrace, Coconut Creek, FL 33073

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. W Alan Williams, President
(Typed or printed name and capacity of person signing application)

STATE OF WYOMING
Office of the Secretary of State

FILED
2009 OCT 23 PM 4:30
SECRETARY OF STATE
FALL HASSEE, WYOMING

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby
certify that according to the records of this office,

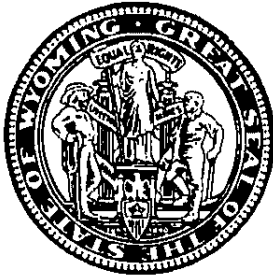
AJ Williams Solution, Inc.


is a
Profit Corporation

formed or qualified under the laws of Wyoming did on **May 15, 2008**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2008-000555074**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 20th day of October, 2009 at 6:13 AM. This certificate is assigned 006262626.




Secretary of State