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(Requestor's Name)		
(Address)		
•		
(Address)		
,		
(City/State/Zip/Phone #)		
(Only/State/Zipir Holle #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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11/13/09--01021--001 **70.00

2009 NOV 13 PM 4: 36

op 11/10/09

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: M. C. Biancone Racing,	Inc.	
	oration - must include suffix	
Dear Sir or Madam:		
	on for Authorization to Transact Business in Florid d Standing"and check are submitted to register the ss in Florida.	
Please return all correspondence concerning this	matter to the following:	
De	ee Alleyne	
Na	me of Person	
Marquis Equin	e Administration, LLC	
Firm	n/Company	
2755 Pa	iynes Mill Road	
	Address	
Versail	les, KY 40383	
City/S	State and Zip code	
dee@)faboak.com	
E-mail address: (to be	used for future annual report notification)	
For further information concerning this matter, p	lease call:	
Dee Alleyne at (859 ₎ 873-1605	
Name of Person	Area Code & Daytime Telephone Number	OIVISION OF C
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	TARY OF STATE STEPPER TRANSPORT
Enclosed is a check for the following amount: \$70.00 Filing Fee \$\text{Status}\$ Certificate of Status		Status &

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.

Marie Bianc	 		
(If name unavail	•	ne adopted for the purpose of transacting business	in Florida)
Kentucky		3. <u>26-4689845</u>	
•	under the law of which it is incorporated)	(FEI number, if applicable)	
4/13/2009		5. Perpetual	
·	e of incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual")
11/15/09			
		s in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
2755 Paynes	Mill Road, Versailles, KY 40383		
	(Principal office ad	ldress)	
Same			
	(Current mailing ad	idress)	
The transac	tion of any business allowed by la	244	~ 0
	s) of corporation authorized in home state or		2009 NOV 13
			S 50
Name and stree	et address of Florida registered agent: (P.	.U. Box NUT acceptable)	- S
Name:	Marie Biancone		,, -
	19501 East Country Club Dr. # 3	303	corponation 3 PM 4: 36
fice Address:			3
fice Address:	According	22400	
fice Address:	Aventura	, Florida 33180	o, ~
fice Address:	Aventura (City)	, Florida 33180 (Zip code)	o, -₹
. Registered a	(City) gent's acceptance:	(Zip code)	
Registered a	(City) gent's acceptance: sed as registered agent and to accept seri	(Zip code) vice of process for the above stated corporati	ion at the plac
Registered a wing been nam ignated in this	(City) gent's acceptance: sed as registered agent and to accept serv application, I hereby accept the appoint	(Zip code) vice of process for the above stated corporati tment as registered agent and agree to act in	ion at the place this capacity
. Registered as wing been names signated in this of the contraction of	(City) gent's acceptance: sed as registered agent and to accept serv application, I hereby accept the appoint	(Zip code) vice of process for the above stated corporati tment as registered agent and agree to act in relative to the proper and complete perform	ion at the place this capacity
. Registered as aving been nam signated in this or the control of	(City) gent's acceptance: led as registered agent and to accept serior application, I hereby accept the appoint omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporati tment as registered agent and agree to act in relative to the proper and complete perform	ion at the place this capacity
aving been nam signated in this rther agree to c	(City) gent's acceptance: led as registered agent and to accept serior application, I hereby accept the appoint omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporati tment as registered agent and agree to act in relative to the proper and complete perform	ion at the place this capacity

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	DIVISION OF CORPORATION	
Chairman: Marie C. Biancone	2009 NOV 13 PM 4: 36	
Address: 2755 Paynes Mill Road		
Versailles, KY 40383		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:	A 1	
Address:		
B. OFFICERS		
President: Marie C. Biancone		
Address: 2755 Paynes Mill Road		
Versilles, KY 40383		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application	on listing additional officers and/or directors.	
13. Signature of Director or Officer listed in num		
(Signature of Director or Officer listed in num Marie C Biancone President	nber 12 of the application)	

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

Commonwealth of Kentucky Trey Grayson, Secretary of State

Trey Grayson
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
http://www.sos.ky.gov

Certificate of Existence

Authentication number: 88216

Visit http://apps.sos.ky.gov/business/obdb/certvalidate.aspx to authenticate this certificate.

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

M.C. BIANCONE RACING, INC.

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is April 13, 2009 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 12th day of November, 2009, in the 217th year of the Commonwealth.

2009 NOV 13 PM L: 36



Trey Grayson
Secretary of State
Commonwealth of Kentucky
88216/0727667