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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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DEFARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2009

LAZARUS

SUBJECT: DORAL PAINTING CORP.

Ref. Number: W09000052102

We have received your document for DORAL PAINTING 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):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2150.00.

Please return the corrected original and one copy of 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) 245-6062.

Eula Peterson Regulatory Specialist II New Filing Section

Letter Number: 809A00036657

Division of Comparations D.O. DOV 6997 Tollahassas Florida 99914

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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ORATION NAME(S) & D	OCUMENT NUMBER(S), (i	f known):
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21(7/07)		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 SUBMITT. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	ED TO
1. Donal Painting Corp. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	8
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	MA TO THE
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business i	n Florida
2. South Carolina 3. 26-1330883 (State or country under the law of which it is incorporated) (FEI number, if applicable)	<u> </u>
4. 11/5/07 5. PERPETUAL	
4. 11/5/07 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "pe	rpetual")
6. 11/1/2009	•
(Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 577 NW 19 ST. Homes Tead F	22/27
7. 577 NW 19 ST. Homes TEad Formula (Principal office address)	<u> </u>
ζ,	
(Current mailing address)	
8(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)	
Donalia Canalaga	
Office Address: 5/1 NW 19 ST.	
HOMESTEAD , Florida 33030 (City) (Zip code)	
(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 designated in this application, I hereby accept the appointment as registered agent and agree to act in	
further agree to comply with the provisions of all statutes relative to the proper and complete performa	
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.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: DonaLio Sanchez
Address: 577 NW 19 ST.
Homestead FL 33030
Vice Chairman:
Address:
Director:
Address:
T's to
Director:
Address:
President: DonaLio Sanchez. Address: 577 NW 19 ST Homestead FL 33030
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. Donalio Sanchez. (Typed or printed name and capacity of person signing application)
And the second s

The State of South Carolina



09 DEC - M. 10: 29

Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

DONAL PAINTING CORP.,

a corporation duly organized under the laws of the State of South Carolina on November 5th, 2007, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 19th day of November, 2009.

Mark Hammond, Secretary of State