Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090002600393)))



H090002600393ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : ALLEY MAASS ET AL (SJH)

Account Number : I19990000280 Phone : (561)659-1770 Fax Number : (561)833-2261

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please \*\*\*\*

Email Address: tim.hanlon@amrl.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

John H. Longmaid Designs, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03, 4
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

<del>ل</del> بب

12/17/2009

## 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.

John H.	Longmaid Designs, Inc.			
	corporation; must include "INCORPORAT	'ED," "C	OMPANY," "CORPORATION,"	_
"inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")			
(If name unavei	iable in Florida, enter alternate corporate na	me adon	ted for the purpose of transacting busi	inesa in Florida)
	•	_	• •	•
Maine	under the law of which it is incorporated)	. 3,	01-0382498 (FEI number, if applicable	
		_	, , , , ,	,
(Date	6, 1982	<u></u> Dr	ration: Year corp. will cease to exist	or "perpetual")
	not as yet	·	•	• •
	(Date first transacted busine	ss in Flo	rida, if prior to registration)	<u> </u>
	• • • • • • • • • • • • • • • • • • • •		S., to determine penalty liability)	
2336 SE	Ocean Blyd., #312, Stuart,	FL 3	4996	
<u> </u>	(Principal office	address)		
c/o M. Ti	mothy Hanlon, 340 Royal Po	incia	na Way, Suite 321, Palm	Beach, F
	(Current mailing	address)		
	Photography			•
(Purnose/s	s) of corporation authorized in home state o	er.	to be carried out in whate of Florida)	<del>-75</del> 5 - <del>18</del>
(1 m beacts	sy to corporation equiporated in storms state o	n cooning	to be duling out in state of 1 source)	ECI
Name and stree	et address of Florida registered agent: (	P.O. Bo	x <u>NOT</u> acceptable)	SECRET
Name:	M. Timothy Hanlon			SS.
ffice Address:	340 Royal Poinciana Way,	Su1te	321	T P
	Palm Beach		, Florida 33480	r s
	(City)		(Zip code)	70 2
Damistanas				DA TE OS
. veRipielan M	gent's acceptance:			

Having been named as registered agent and to occept 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)

<sup>11.</sup> 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 s	and business addresses of officers and/or directors:	SC. C. S. J. Os.
A. DIRECT	tors	NOT.
Chairman: _	John H. Longmaid	,
Address:	2336 SE Ocean Boulevard, #312	
	Stuart, FL 34996	
	ID:	
		•
Director:		
		•
Director:		
B. OFFICE		
	·	
	2226 CP Coard Bowlerest #912	
Address:	Student 18 21.005	<u> </u>
Address:		
	AND	نىدىنىيە چەنىيىدىنىڭ ئىلىنىدىنىدىنىڭ ئالىرىنىڭ ئىلىنىنىدىنىڭ ئالىرىنىڭ ئالىرىنىڭ ئالىرىنىڭ يېچاپىي
Address:		
NOTE: If ne	cossery, you may attach an add Andym to the application listing a	idditional officers and/or directors
		and discollent of purposes.
13	(Signature of Director of Officer lighted in number 12 of	the application)
14	John H. Languard Press	dent
	(Typed or printed name and capacity of person signing	g application)

## State of Maine



## Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of organization, amendment and dissolution of corporations and annual reports filed by the same.

I further certify that JOHN H. LONGMAID DESIGNS is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is June 04, 1982.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this ninth day of December 2009.

MATTHEW DUNLAP
Secretary of State