

FI0000004381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

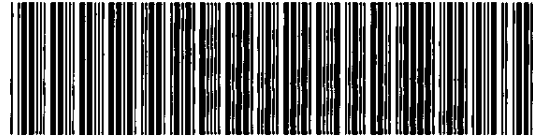
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000185410520

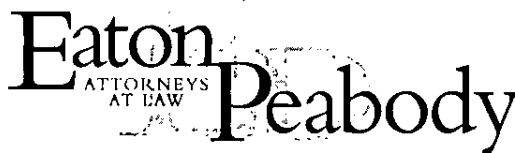
09/29/10--01023--008 \*\*87.50

10 SEP 29 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

1/11

John F. Loyd, Jr.  
jloyd@eatonpeabody.com



167 Park Row, P.O. Box 9  
Brunswick, Maine 04011-0009  
Phone 207-729-1144 Fax 207-729-1140  
www.eatonpeabody.com

September 28, 2010

*Via FEDEX*

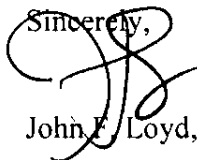
New Filing Section  
Division of Corporations  
Clifton Building, 2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: D.L. Poulin, Inc.  
Application by Foreign Corporation for Authorization to Transact Business  
in Florida

Dear Sirs/Madam:

Enclosed please find Cover Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida, along with Certified Copy of Certificate of Existence for D.L. Poulin Inc. dated September 24, 2010, and check No. 65330 from D.L. Poulin Inc. made payable to Florida Department of State in the amount of \$87.50 for filing fee, Certificate of Status and Certified Copy.

Please process as soon as possible. If you have any questions or need any further information, please don't hesitate to contact us.

Sincerely,  
  
John F. Loyd, Jr.

JFL/smy  
Enclosures  
cc: D.L. Poulin, Inc.

## COVER LETTER

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

**SUBJECT:** D.L. Poulin, 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:

David L. Poulin

Name of Person

D.L. Poulin, Inc.

Firm/Company

40 Jordan Avenue

Address

Brunswick, Maine 04011

City/State and Zip code

Build@dlpoulin.com

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

For further information concerning this matter, please call:

John F. Loyd, Jr. Esq.

at ( 207 ) 729-1144

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 Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

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

2. Maine 3. EIN 01-051-2628  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 1, 1997 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. 40 Jordan Avenue, Brunswick, Maine 04011  
(Principal office address)

40 Jordan Avenue, Brunswick, Maine 04011  
(Current mailing address)

8. Common general contractor/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)

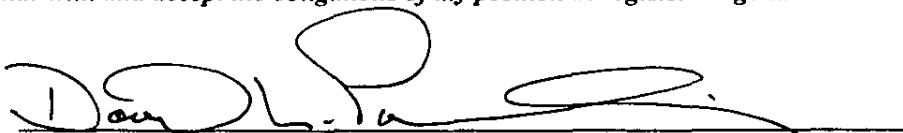
Name: David L. Poulin

Office Address: 28020 Cavendish Ct #5203

Bonita Springs, Florida 34135  
(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) David L. Poulin

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.

10 SEP 29 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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

**A. DIRECTORS**

None

APPROVED  
AND  
FILED

10 SEP 29 PM 4:22

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: David L. Poulin

Address: 28020 Cavendish Ct. #5203  
Bonita Springs, FL 34135

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: James Nathan Hall

Address: 40 Jordan Avenue, Brunswick, Me 04011

Treasurer: Joanne L. Poulin

Address: 28020 Cavendish Ct. #5203, Bonita Springs, FL 34135

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. David L. Poulin, President

(Typed or printed name and capacity of person signing 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 D.L. POULIN, INC., formerly DLPBP, INC. is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is August 01, 1997.*

*I further certify that on:*

|                    |   |
|--------------------|---|
| August 01, 1997    | ARTICLES OF INCORPORATION were filed.               |
| September 30, 1997 | ASSUMED NAME was filed.                             |
| December 15, 1999  | CANCELLATION/TERMINATION OF ASSUMED NAME was filed. |
| December 15, 1999  | CHANGE OF LEGAL NAME was filed.                     |
| May 09, 2000       | CHANGE OF REGISTERED OFFICE was filed.              |

*No further amendments have been filed to date.*

*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 twenty-fourth day of September 2010.*



***MATTHEW DUNLAP***  
***Secretary of State***