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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

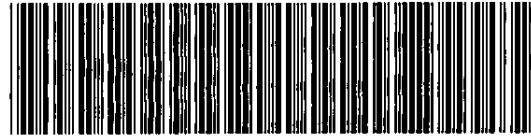
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF
TALLAHASSEE COUNTY

NOV 17 2010
J. Shivers

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT:

KM Painting 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:

Idamiris Cordero.
Name of Person

Firm/Company

3804 Eagle Isle Cir.

Address

Kissimmee, Florida 34746.

City/State and Zip code

Idamiris KM Painting. WS

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

For further information concerning this matter, please call:

Idamiris Cordero

Name of Person

-at (*407*) *201-3394*

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

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TALLAHASSEE, FL
SECRETARY OF STATE

**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. KM Painting 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. Puerto Rico 3. 66-0651037
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/12/2004 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. Urbanizacion Luguvillo Mar Calle A CC 2 Luguvillo, P.R 00773
(Principal office address)
3809 Eagle Isle Cir Kissimmee, Florida 34746
(Current mailing address)

8. Any and all Lawful Business
(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)

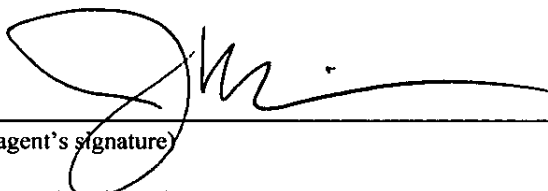
Name: Juan H. Garcia

Office Address: 1517 Fortune Retail Ct.

Kissimmee, Florida 34744
(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)

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.

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TALLAHASSEE

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Idamaris Condero

Address: 3009 Eagle Isle Cir

Kissimmee, Florida 34746

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Idamaris Condero Idamaris Condero

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

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CLERK OF COURT
JULIA L. ROSE
TALLAHASSEE, FLORIDA



Gobierno de Puerto Rico
DEPARTAMENTO DE ESTADO
San Juan, Puerto Rico

CERTIFICADO DE CUMPLIMIENTO ("GOOD STANDING")

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2010 NOV 15 AM 11:21
SECRETARY
TALLERES

Yo, **KENNETH McCLINTOCK HERNÁNDEZ**, Secretario de Estado del Gobierno de Puerto Rico,

CERTIFICO: Que, a tenor con las disposiciones de la Ley General de Corporaciones, "**KM PAINTING INC.**", registro **148364** una corporación **con fines de lucro** organizada bajo las leyes de Puerto Rico ha cumplido con la radicación de Informes Anuales.

EN TESTIMONIO DE LO CUAL, firmo la presente y hago estampar en ella el Gran Sello del Estado Libre Asociado de Puerto Rico, en la ciudad de San Juan, hoy 3 de noviembre de 2010.


KENNETH McCLINTOCK HERNÁNDEZ
Secretario de Estado