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PAUL ANASSEE FROMFT.

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COVER LETTER

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TO: New Filing Section Division of Corporations	
SUBJECT: PAM LONTOS, INC. Name of corporation - must include suffix	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Fl "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to registe above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Rick Dupwick	
Name of Person	
Pam Lontos, Inc. Firm/Company	
Firm/Company	
7629 Milano DRIVE Address ORIANDO FL 32835 City/State and Zip code Rickdudvick Ogmail. com E-mail address: (to be used for future annual report notification)	
Address	<u> </u>
OR/ANDO FL 32835	
City/State and Zip code	
Rickdudnick @ amail. com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
C. 1 D.	
Rick DUDNICK at (402) 522-8630 Name of Person Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: MAILING ADDRESS:	
New Filing Section New Filing Section	
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327	
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
	ling Fee, e of Status & Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. PAN LONTOS, 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	<u>a)</u>
1exas 3. 75-1777455	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
Aug 28,1981 5. Perpetual	_
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual"	")
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7629 Milano Drive Orlando FL 32835 (Principal office address)	
7629 Milano Orive Orlando FL 32835 (Current mailing address)	_
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	_
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: PAM LONTOS	
ffice Address: 7629 Milano DR.	FILED
Orlando, Florida 32835	
(City) (Zip code)	
O. Registered agent's acceptance: Saving been named as registered agent and to accept service of process for the above stated corporation at the	e plac
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this cap Arther agree to comply with the provisions of all statutes relative to the proper and complete performance of	pacity.
nd I am familiar with and accept the obligations of my position as registered agent.	
Dan Lowos	
(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: _ Address: __ Vice Chairman: Address: Director: Address: **B. OFFICERS** Address: 7629 MILANO Prive Certardo FT 32435 Milano Dire Orlando FI 32835 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 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.

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for PAM LONTOS, INC. (file number 57584700), a Domestic For-Profit Corporation, was filed in this office on August 28, 1981.

It is further certified that the entity status in Texas is in existence.

FILED

SECRETARY OF STANLAND SCENE AND A SECRETARY OF STANLAND SCENE AND A

In testimony whereof, I have hereunto signed by name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 18, 2011.



Phone: (512) 463-5555

Hope Andrade Secretary of State