

# FI10000001359

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

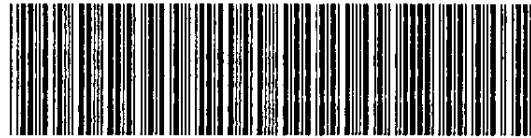
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*W11-15269*

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03/14/11 01032-004 \$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAR 28 PM 2:16

APPROVED  
AND  
FILED

*W11*

## COVER LETTER

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

**SUBJECT:** NORMAN MANN CARPENTRY 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:

NORMAN MANN

Name of Person

NORMAN MANN CARPENTRY INC

Firm/Company

881 HOLLY TERRACE ROAD

Address

FRANKLIN, N.C. 28734

City/State and Zip code

NORMANMANNCARPENTRY@GMAIL.COM

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

For further information concerning this matter, please call:

NORMAN MANN

Name of Person

at ( 828 ) 342-5080

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2011

NORMAN MANN  
881 HOLLY TERRACE ROAD  
FRANKLIN, NC 28734

SUBJECT: NORMAN MANN CARPENTRY INC  
Ref. Number: W11000015269

We have received your document for NORMAN MANN CARPENTRY INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 511A00006466

**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. NORMAN MANN CARPENTRY INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

NORMAN M MANN CARPENTRY INC  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NORTH CAROLINA 3. 593576169  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 19<sup>TH</sup> DAY OF APRIL 2007 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. HAVE NOT TRANSACTED BUSINESS YET  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 881 HOLLY TERRACE ROAD, FRANKLIN, NC. 28734  
(Principal office address)

AS ABOVE  
(Current mailing address)

8. CARPENTRY  
(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)

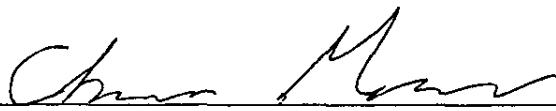
Name: MR CRISTOPHER MANN

Office Address: 598 PAINTED LEAF DRIVE

BROOKSVILLE, Florida 34604  
(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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAR 28 PM 2:16

APPROVED  
AND  
FILED

APPROVED  
AND  
FILED

11 MAR 28 PM 2:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: NORMAN MANN

Address: 881 HOLLY TERRACE ROAD, FRANKLIN N.C. 28734

Vice President: KAY J MANN

Address: 881 HOLLY TERRACE ROAD FRANKLIN, N.C. 28734

Secretary: KAY J MANN

Address: 881 HOLLY TERRACE ROAD FRANKLIN NC 28734

Treasurer: KAY J MANN

Address: 881 HOLLY TERRACE ROAD FRANKLIN, NC 28734

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

13. Norm Mann

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. NORMAN MANN

PRESIDENT

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



# NORTH CAROLINA

## Department of The Secretary of State

### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### **NORMAN MANN CARPENTRY, INC.**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 19th day of April, 2007, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

APPROVED  
AND  
FILED

11 MAR 28 PM 2:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of March, 2011.

*Elaine F. Marshall*

Secretary of State