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(Business Entity Name)

(Document Number)

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12/07/10--01012--002 **78.75

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APR 12 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

601-56935
75 4/13/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tomarco Contractor Specialties, 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:

Anthony Rubalcava

Name of Person

Tomarco Contractor Specialties, Inc.

Firm/Company

14848 Northam St

Address

La Mirada, Ca 90638

City/State and Zip code

arubalcava@isatsvb.com

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

For further information concerning this matter, please call:

Taryn Pfluger

Name of Person

at (714) 523-1771

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

December 10, 2010

ANTHONY RUBALCAVA
TOMARCO CONTRACTOR SPECIALITES, INC.
14848 NORTHAM ST
LA MIRADA, CA 90638

SUBJECT: TOMARCO CONTRACTOR SPECIALTIES, INC.
Ref. Number: W10000056936

We have received your document for TOMARCO CONTRACTOR SPECIALTIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II
New Filing Section

Letter Number: 910A00028704

**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. Tomarco Contractor Specialties, Inc.

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

N/A

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

2. California

(State or country under the law of which it is incorporated)

3. 95-3095484

(FEI number, if applicable)

4. 2/15/1977

(Date of incorporation)

5. perpetual

(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. 14848 Northam St, La Mirada, Ca 90638

(Principal office address)

14848 Northam St, La Mirada, Ca 90638

(Current mailing address)

8. Would like to perform design work, including mechanical bracing, for projects in the state of Florida.

(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: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston, Florida 33331

(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.

NRAI Services Inc

By: [Signature]

Wendy D Rea, Assistant Secretary

(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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APR 12 PM 2:30
CLERK 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: William Thompson

Address: 14848 Northam St, La Mirada, Ca 90638

Vice President: Keith Watkins

Address: 14848 Northam St, La Mirada, Ca 90638

Secretary: _____

Address: _____

Treasurer: Dave Lewis

Address: 14848 Northam St, La Mirada, Ca 90638

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. Dave Lewis

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

FILED
APR 12 PM 2:30
CLERK OF THE COURT
JULIA M. HARRIS, CLERK

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

TOMARCO CONTRACTOR SPECIALTIES, INC.

FILE NUMBER: C0791730
FORMATION DATE: 02/15/1977
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
APR 12 PM 2:30
SECRETARY OF STATE
SACRAMENTO, CALIFORNIA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of April 04, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State