E1100003498		
(Requestor's Name) (Address) (Address)	100210828201	
(City/State/Zip/Phone #)	08/12/1101014023 **87.50	
Certified Copies Certificates of Status Special Instructions to Filing Officer:	AUG 29 AH D: 45	
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** s. h

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.

RWM Contracting inc. 1. (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,	orida)	
2.	$\frac{M_{ichigan}}{(\text{State or country under the law of which it is incorporated})} 3. \frac{452176357}{(\text{FEI number, if applicable})}$		
4.	. <u>OS-19-11</u> (Date of incorporation) 5. <u>Z perpetra</u> (Duration: Year corp. will cease to exist or "perpe	tual")	
6.	One <u>ref</u> - <u>Waiting</u> on <u>registration</u> (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7.	(Principal office address)		
	P.O Box 2038 New port richey, FL 34656 (Current mailing address)		
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	AUG 29	
9.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	AM 10: 45	1974 1974 1974 1974 1974
O	Mice Address: <u>7422 Maha Ffey Orive</u> <u>New port richey</u> , Florida <u>34653</u> (City) (Zip code)	:45	·
	(City) (Zip code)		

10. Registered agent's acceptance:

1

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.



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.

A. DIRECTORS	
Chairman: Kab Mryncza	
Address: PO BOX 2038	
New Port richey, FL 34656	- <u></u>
Vice Chairman:	
Address:	
Director:	
Address:	
Director	
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
B. OFFICERS President: <u>Rob Mryncza</u>	
Address: P.O Box 2038	
New port richey, FL 34656	The N Same
Vice President:	
Address:	
······································	
Secretary:	
Address:	
Freasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
Signature of Director or Officer	Firms that the facts stated herein
The officer or director signing this document (and who is listed in number 12 above) af are true and that he or she is aware that false information submitted in a document to the hird degree felony as provided for in s.817.155, F.S.	
14. Robert Mryncza	

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

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



7000-666-171