

# Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Account Name	:	HARVARD BUSINESS SERVICES, INC.
Account Number	:	120080000045
Phone	:	(302)645-7400
Fax Number	:	(302)645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: clinton@charmsinvestments.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

### Charms Investments Limited

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Fax Server



November 4, 2011

FLORIDA DEPARTMENT OF STATE **Division of Corporations** HARVARD BUSINESS SERVICES, INC.

SUBJECT: CHARMS INVESTMENTS LIMITED REF: W11000056388

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

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

FAX Aud. #: H11000263170 Letter Number: 311A00025115

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P.O BOX 6327 - Tallahassee, Florida 32314

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13022693954 From: Paul Sponaugle

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## 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. Charms Investments Limited Inc.

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

Delaware		3.	45-3725698
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)
November 2, 2	2011	5.	perpetual
(Date	c of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
No business tr	ansacted in Florida prior to registration		
	•		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
2625 SW 91st 8	Street, Gainesville, FL 32608		
	(Principal office	add	ress)
2625 SW 91st	Street, Gainesville, FL 32608		
	(Current mailing	add	iress)
Any legal purp	ose	-	20
(Purpose(s	s) of corporation authorized in home state o	er co	buntry to be carried out in state of Florida)
Name and stree	et address of Florida registered agent: (	(P.C	D. Box <u>NOT</u> acceptable)
Name:	Clinton Greyling		
ffice Address:	2625 SW 91st Street		
	Gainesville		, Florida 32608
	(City)		(Zin 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.

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

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A. DIRI	ECTORS
Chairman	
Address:	
Vice Cital	Lungo:
ruui <u>1</u> .93.	
\	
Address: ·	
Director:	
Address:	
B. OFFI	CERS
Augirșe: '	2625 SW 91st Street
	Gainesville, FL 32608
Vice. Presi	dent:
Address:	
۰.	
Secretary:	
Address:	
NOTE: 1	I necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. <u>(Signature of Director or Officer listed in number 12 of the application)</u>

14. Clinton Greyling, President

:

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

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# The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHARMS INVESTMENTS LIMITED" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHARMS INVESTMENTS LIMITED" WAS INCORPORATED ON THE SECOND DAY OF NOVEMBER, A.D. 2011.

5060215 8300 111163996

AUTHENTIC TION: 9134419

DATE: 11-03-11 (((H11000263170 3)))