

F1200001228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

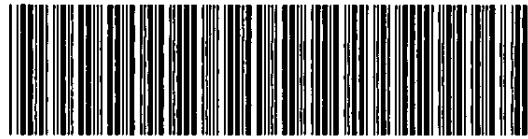
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W12-13088

K 03/21/12



100223760721

03/05/12--01045--007 **737.50

FILED
12 MAR 20 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



RECEIVED

12 MAR 20 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2012

KLZ CONSULTING INC.

MARIA NORTON
11836 HOLLYHOCK DRIVE
LAKEWOOD RANCH, FL 34202

SUBJECT: KLZ INCORPORATED
Ref. Number: W12000013088

We have received your document for KLZ INCORPORATED and your check(s) totaling \$737.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L05000085392 (KLZ, LLC).

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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 212A00008664

Q009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: KLZ INCORPORATED

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:

MARIA NORTON

Name of Person

KLZ INCORPORATED

Firm/Company

11836 HOLLYHOCK DRIVE

Address

LAKEWOOD RANCH FL 34202

City/State and Zip code

mznorton@live.com

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

For further information concerning this matter, please call:

Maria Norton

Name of Person

at (941) 320-6974

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

plus \$650 for
late application
Total: 737.50

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. KLZ INCORPORATED

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

KLZ CONSULTING INC.

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

2. IOWA

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

3. EIN 42-1452886

(FEI number, if applicable)

4. 08/08 2-23-1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 1-1-2011

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11836 Hollyhock Drive, Lakewood Ranch FL 34202

(Principal office address)

11836 Hollyhock Drive, Lakewood Ranch FL 34202

(Current mailing address)

8. Sale of artwork

(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: Maria Norton

Office Address: 11836 Hollyhock Drive

Lakewood Ranch, Florida 34202
(City) (Zip code)

12 MAR 20 PM 2:24
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
REC'D BY MAIL

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.

Maria Norton

(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: _____

Director: _____

Address: _____

B. OFFICERS

President: Maria Norton

Address: 11836 Hollyhock Drive
Lakewood Ranch FL 34202

FILE
12 MAR 20 PI 2:24
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Vice President: Maria Norton

Address: _____

Secretary: Maria Norton

Address: _____

Treasurer: Maria Norton

Address: _____

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

13. Maria Norton _____ 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. Maria Norton President

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

IOWA SECRETARY OF STATE
MATT SCHULTZ



CERTIFICATE OF EXISTENCE

Date: 2/27/2012

Name: KLZ INCORPORATED (490 DP - 193714)

Date of Incorporation: 2/23/1996

Duration: PERPETUAL

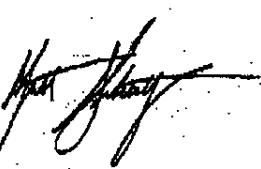
I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. Articles of dissolution have not been filed.

FILED
12 MAR 20 FM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate ID: CS63756

To validate certificates visit:
sos.iowa.gov/ValidateCertificate


Matt Schultz, Iowa Secretary of State