

F12000001276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

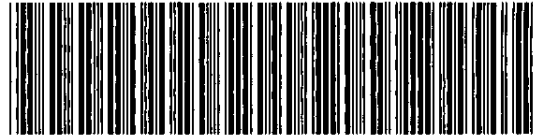
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000225755750

03/22/12--01015--003 \*\*70.00

FILED

12 MAR 22 PM 12:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
3/26/12

## COVER LETTER

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

**SUBJECT:** The Laura Lewis Group, 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:

Gregory C. Roberts, Esquire

Name of Person

Klingbeil & Roberts, P.A.

Firm/Company

341 W. Venice Avenue

Address

Venice, FL 34285

City/State and Zip code

nan@k-rlaw.com

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

For further information concerning this matter, please call:

Nan Briley

Name of Person

at ( 941 ) 485-2900

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

**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. The Laura Lewis Group, Inc.  
(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)

2. Colorado 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 1, 2007 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 336 Park Trace Boulevard, Osprey, FL 34229  
(Principal office address)

336 Park Trace Boulevard, Osprey, FL 34229  
(Current mailing address)

8. Any and all lawful business  
(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: David Robert Lewis

Office Address: 336 Park Trace Blvd.

Osprey, Florida 34229  
(City) (Zip code)

**FILED**  
12 MAR 22 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.

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

**A. DIRECTORS**

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

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

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

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

Director: Laura Ruben Lewis

Address: 336 Park Trace Blvd.

Osprey, FL 34229

Director: David Robert Lewis

Address: 336 Park Trace Blvd.

Osprey, FL 34229

**B. OFFICERS**

President: Laura Ruben Lewis

Address: 336 Park Trace Blvd.

Osprey, FL 34229

Vice President: David Robert Lewis

Address: 336 Park Trace Blvd.

Osprey, FL 34229

Secretary: David Robert Lewis

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

Treasurer: David Robert Lewis

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

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

13. David Robert Lewis

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. David Robert Lewis, Vice President

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

**FILED**

12 MAR 22 PM 12:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

FILED  
12 MAR 22 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE**

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

**The Laura Lewis Group, Inc.**

is a **Corporation** formed or registered on 01/01/2007 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20061530579.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/21/2012 that have been posted, and by documents delivered to this office electronically through 02/23/2012 @ 06:57:55.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 02/23/2012 @ 06:57:55 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8174556.



Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*