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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TAILMIASSEE, FLORIDA

4/17 B W12000050051

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Kaw Development & Construction, Inc.	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Bus "Certificate of Existence," or "Certificate of Good Standing" and check are submitted above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Janene Ervin	
Name of Person	
Kaw Development & Construction, Inc.	
Firm/Company	
5909 Martway	
Address	
Mission, KS 66202	SEC SEC
City/State and Zip code	震 第 卫
janene@constructionkdc.com 🗸	SS & C
E-mail address: (to be used for future annual report notific	
For further information concerning this matter, please call:	D PM 2: 45 :STATE FLORIDA
Janene Ervin at (913) 677 1920	45
Name of Person Area Code & Daytime Telephone N	umber
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRI New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32301	itions
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$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. Kaw Development & Construction, Inc.		
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp.," "Inc.," "Corp.," "Inc.," "Corp.," "Inc.," "Corp.")		
KDC Construction, Inc.		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busin	ess in Florida)	
2. Kansas 3. 48-1092905		
4. 12/21/1990 5. Perpetual		
(Date of incorporation) (Duration: Year corp. will cease to exist or	r "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, 5909 Martway, Mission, KS 66202		
(Principal office address)		
(Current mailing address)	75 7	
	100	
8, Construction Company	三 養殖事	
(Purposo(s) of corporation authorized in home state or country to be carried out in state of Florida)	ASSET -9	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
Name: Contractor Licensing Inc.		
	1 2: 4	
Office Address: 12268 tamiami Trail E, Suite 301	2: 45 1ATE ORIDA	
Naples , Florida 239-774-5100 (City) (Zip code)	0.	
(City) (Zip code)		
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corpordesignated in this application, I hereby accept the appointment as registered agent and agree to accept the agree to comply with the provisions of all statutes relative to the proper and complete performed I am familiar with and accept the obligations of my position as registered agent.	t in this capacity. I	

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 oustody 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: __ Vice Chairman: ______ Address: __ Director: __ Address: __ **B. OFFICERS** President: Janene Ervin Address: 5909 Martway 77 Mission, KS 66202 Vice President: Address: ____ Secretary: Cheryl Perry Address: 2800 W. 118th Street, Leawood, KS 66210 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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

14. Janene Ervin

STATE OF KANSAS OFFICE OF SECRETARY OF STATE

I, Kris W. Kobach, Kansas Secretary of State, certify that the records of this office reveal the following:

Business Entity ID Number: 1766591

Entity Name: KAW DEVELOPMENT & CONSTRUCTION, INC.

Entity Type: KANSAS FOR PROFIT CORPORATION

State of Organization: KANSAS

Resident Agent: Janene Ervin

Registered Office: 5909 MARTWAY, SUITE 210, MISSION, KS, 66202

was filed in this office December 21, 1990,

and is in good standing,

having fully complied with all requirements of this office.

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

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RETARY OF STATE
ANASSEE, FLORIDA

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of March 12, 2012.



KRIS W. KOBACH

KANSAS SECRETARY OF STATE