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Office Use Only



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#### COVER LETTER

TO: New Filing Section Division of Corporations	
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SUBJECT: Colonial Tailors Chalk, Inc.  Name of corporation - must include suffix	_
Name of corporation - must include surfix	
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.	る書とこ
Please return all correspondence concerning this matter to the following:	
Linda Robin	
Name of Person	O
Please return all correspondence concerning this matter to the following:  Linda Robin  Name of Person  Colonial Tailors Chalk, Inc.  Firm/Company	, 5. 1 c
Firm/Company	<u> </u>
302 Ewell Rd.	
Address	_
Williamsburg, VA 23188	
City/State and Zip code	
ColonialTailors@aol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Linda Robin at (757 ) 291-2445	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sum \text{S78.75 Filing Fee & Certified Copy}\$\$\$ Certificate of Status \$\$ Certified Copy \$\$ Certified Copy	



NEGENED

12 JUN - 1 AM 11:59

#### FLORIDA DEPARTMENT OF STATE Division of Corporations of Corporations

May 15, 2012

LINDA ROBIN 302 EWELL RD. WILLIAMSBURG, VA 23188

SUBJECT: COLONIAL TAILORS CHALK, INC.

Ref. Number: W12000026973

We have received your document for COLONIAL TAILORS CHALK, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 412A00014402

#### 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.

Name: Linda Robin  ffice Address: 181 Market Street.  Santa Rosa Beach, Florida 32459  (City) (Zip code)		•		adopted for the purpose of transacting business in Florida
Compose   February 17, 2000   February 17, 2			_ 3.	
(Date of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  181 Market Street. Santa Rosa Beach, FI 32459  (Principal office address)  302 Ewell Rd. Suite D. Williamsburg, VA 23188  (Current mailing address)  All Legal Business  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Linda Robin  ffice Address:   181 Market Street.  Santa Rosa Beach, (City)  Registered agent's acceptance:	(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  181 Market Street. Santa Rosa Beach, FI 32459  (Principal office address)  302 Ewell Rd. Suite D. Williamsburg, VA 23188  (Current mailing address)  All Legal Business  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Linda Robin  ffice Address: 181 Market Street.  Santa Rosa Beach, (City)  (City)  Registered agent's acceptance: 22			_ 5.	
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(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  181 Market Street. Santa Rosa Beach, FI 32459  (Principal office address)  302 Ewell Rd. Suite D. Williamsburg, VA 23188  (Current mailing address)  All Legal Business  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Linda Robin  ffice Address: 181 Market Street.  Santa Rosa Beach, Florida 32459  (City)  Registered agent's acceptance: 22	_	(D. 5	<del></del>	
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(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Linda Robin  To the fine Address: 181 Market Street.  Santa Rosa Beach, Florida 32459  (City)  City)  Registered agent's acceptance:				
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Ffice Address: 181 Market Street.  Santa Rosa Beach, Florida 32459  (City) (Zip code)	Name and stree	<u>t address</u> of Florida registered agent:	(P.C	D. Box NOT acceptable)
Santa Rosa Beach, Florida 32459 (City) (Zip code)	Name:	Linda Robin		
Santa Rosa Beach, Florida 32459 (City) (Zip code)	ffice Address:	181 Market Street		
). Registered agent's acceptance:	ince riddiess.			
Registered agent's acceptance:				, Florida 32439
		(Chy)		(21) code)
aving been named as registered agent and to accept service of process for the above stated corporation at the				
signated in this application, I hereby accept the appointment as registered agent and agree to act in this cap			servi	
rther agree to comply with the provisions of all statutes relative to the proper and complete performance of t ad I am familiar with and accept the obligations of my position as registered agent.	aving been nam			nent as registered agent and agree to act in this can

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: Christopher Robin Address: 302 Ewell Rd. Suite D Williamsburg, VA 23188 Vice President: Linda Robin Address: 302 Ewell Rd. Suite D Williamsburg, VA 23188 Secretary: Christopher Robin Address: 302 Ewell Rd. Suite D. Williamsburg, VA 23188 Treasurer: Christopher Robin Address: 302 Ewell Rd. Suite D. Williamsburg, VA 23188 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. DRESIDENT 13. Christopher Robin 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. Christopher Robin

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

## Commonwealth of Hirginia



### State Corporation Commission

CERTIFICATE OF GOOD STANDING

#### I Certify the Following from the Records of the Commission:

That Colonial Tailor's Chalk, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is February 17, 2000;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

12 JUH - 1 AM 7:26



Signed and Sealed at Richmond on this Date: April 16, 2012

Joel H. Peck, Clerk of the Commission