

F14000001697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

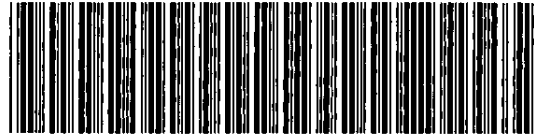
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400258404104

04/18/14--01003--019 **650.00

03/31/14--01020--020 **70.00

FILED
14 APR 18 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W14-21020

h 04/18/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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14 APR 16 AM 9:57

SEAL
TALLAHASSEE, FLORIDA

April 2, 2014

DONNA L. BORDEAUX, CPA
BORDEAUX & BORDEAUX, CPAS PA
548 NAUTICAL DRIVE, STE. 202
LAKE WYLIE, SC 29710

SUBJECT: FILTRATION SOLUTIONS OF THE CAROLINAS INC.
Ref. Number: W14000021020

We have received your document for FILTRATION SOLUTIONS OF THE CAROLINAS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 714A00007050

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Filtration Solutions 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:

Donna L. Bordeaux, CPA

Name of Person

Bordeaux & Bordeaux, CPAs PA

Firm/Company

548 Nautical Drive Ste 202

Address

Lake Wylie SC 29710

City/State and Zip code

donna@yourcpapartners.com

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

For further information concerning this matter, please call:

Donna Bordeaux CPA at (704) 752-9845

Name of Person

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. Filtration Solutions, Inc.

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

Filtration Solutions of the Carolinas Inc.

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

2. South Carolina

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

3. 57-0894053

(FEI number, if applicable)

4. 06/29/1989

(Date of incorporation)

5. perpetual

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

6. 1-2-13

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

7. 4361 Charlotte Hwy Ste 301, Lake Wylie SC 29710

(Principal office address)

4361 Charlotte Hwy Ste 301, Lake Wylie SC 29710

(Current mailing address)

8. Sales

(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: Thomas Santoriello

Office Address: 1119 Thayer St

Safety Harbor

(City)

, Florida 34695

(Zip 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.



(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Billie Wells

Address: 4361 Charlotte Hwy Ste 301, Lake Wylie SC 29710

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Billie Wells

Address: 4361 Charlotte Hwy Ste 301, Lake Wylie SC 29710

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Billie B Wells

Signature of Director or Officer

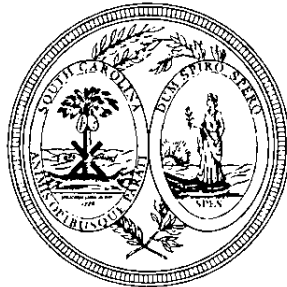
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Billie Wells, President

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The State of South Carolina



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SECRET
TALLAHASSEE, FLORIDA

Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

FILTRATION SOLUTIONS, INC.,
a corporation duly organized under the laws of the State of South Carolina on June 29th, 1989, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
7th day of March, 2014.


Mark Hammond, Secretary of State