

# F/14000002163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

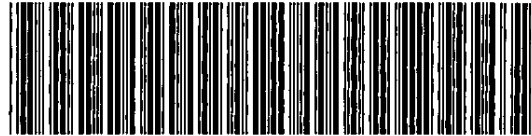
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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04/17/14--01013--011 \*\*87.50

FILED

14 MAY 15 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W/14-21805

R 05/16/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 5, 2014

CYNTHIA M. AMENGUAL-DOWNS  
CMA ENTERPRISES, INC.  
200 WYNDEMERE WAY, #305B  
NAPLES, FL 34105

\*\*\* 2ND CORRECTION \*\*\*

SUBJECT: CMA ENTERPRISES OF NAPLES, INC.  
Ref. Number: W14000024805

RECEIVED  
14 MAY 15 PM 12:17  
TALLAHASSEE, FLORIDA

We have received your document for CMA ENTERPRISES OF NAPLES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 914A00008371



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 18, 2014

CYNTHIA M. AMENGUAL-DOWNS  
CMA ENTERPRISES, INC.  
200 WYNDEMERE WAY, #305B  
NAPLES, FL 34105

SUBJECT: CMA ENTERPRISES, INC.  
Ref. Number: W14000024805

*REFiling NAME Change  
TO → CMA ENTERPRISES OF NAPLES INC.  
4/30/14*

We have received your document for CMA ENTERPRISES, INC. and your check(s) totaling \$87.50. 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.

The document number of the name conflict is L04000087970 (CMA ENTERPRISES, LLC).

The alternate name that you have chosen is not available. Please select a new name.

The date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in

its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 914A00008371

## COVER LETTER

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

**SUBJECT:** CMA ENTERPRISES, 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:

CYNTHIA M. AMENGUAL - DOWNS  
Name of Person  
CMA ENTERPRISES, INC.  
Firm/Company  
200 WYNDEMERE Way # 305 B  
Address  
NAPLES FL 34105  
City/State and Zip code  
CMA.CMAENTERPRISES@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CYNTHIA AMENGUAL-DOWNS at (505) 340-4043  
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. CMA ENTERPRISES, INC.

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

CMA ENTERPRISES OF NAPLES, INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW MEXICO 3. EIN ASSIGNED: 27-0752 499  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 20, 2009 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 200 WYNDEMERE WAY #305B NAPLES FL 34105  
(Principal office address)

200 WYNDEMERE WAY #305B NAPLES FL 34105  
(Current mailing address)

8. CMA ENTERPRISES IS ORGANIZED TO ENGAGE IN THE SALE OF REAL ESTATE,  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) and such other lawful  
Business as may from  
time to time be determined  
by the Board of Directors

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Cynthia M. Amengual - DOWNS

Office Address: 200 WYNDEMERE WAY #305B

Naples, FL, Florida 34105  
(City) (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.

Cynthia Amengual - Downs  
(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: Cynthia Amengual - Downs

Address: 200 WYNDEMERE Way #305B  
NAPLES FL 34105

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

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

Director: DAVID F. METIER

Address: P.O. Box 6509  
Albuquerque, NEW MEXICO 87197

Director: \_\_\_\_\_

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

B. OFFICERS

President: Cynthia Amengual - Downs

Address: 200 WYNDEMERE Way #305B  
Naples FL 34105

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: DAVID F. METIER

Address: P.O. Box 6509 / Albuquerque, NM / 87197

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

13. Cynthia Amengual - Downs  
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. Cynthia Amengual-Downs President 4/16/2014  
(Typed or printed name and capacity of person signing application)

FILED  
14 MAY 15 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
14 MAY 15 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA