

F14000002483

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000133720 3)))



H140001337203A3CV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BUSH ROSS, P.A.
Account Number : 119990000150
Phone : (813) 224-9255
Fax Number : (813) 223-9620

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN -9 PM 1:29

APPROVED
AND
FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

10287-0

FOREIGN PROFIT/NONPROFIT CORPORATION
KC CROMWELL, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

14 JUN -9 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. KC CROMWELL, 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. NORTH CAROLINA

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

3. 20 3466873

(FEI number, if applicable)

4. SEPTEMBER 13, 2005

(Date of incorporation)

5. PERPETUAL

(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. 1430 LAKE POLO DR., ODESSA, FL 33556

(Principal office address)

1430 LAKE POLO DR., ODESSA, FL 33556

(Current mailing address)

8. The Corporation may transact any lawful business for which corporations may be incorporated under Florida

(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: **Bush Ross Registered Agent Services, LLC**

Office Address: **1801 N. HIGHLAND AVE.**

TAMPA

(City)

Florida 33602

(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN - 9 PM 1:29

APPROVED
AND
FILED

6/9/2014 1:46:27 PM

Bush Ross, P.A.

(813) 223-9610

APPROVED
AND
FILED

Page 4

Jun 06 14 04:49p Rob Hoover

813 223 9610
14 JUN -9 PM 1:30²

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: PAMELA HOOVER

Address: 1430 LAKE POLO DR., ODESSA, FL 33556

Director: _____

Address: _____

B. OFFICERS

President: ROBIN C. HOOVER

Address: 1430 LAKE POLO DR., ODESSA, FL 33556

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. _____

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. ROBIN C. HOOVER, PRESIDENT

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



NORTH CAROLINA

Department of the Secretary of State

14 JUN -9 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

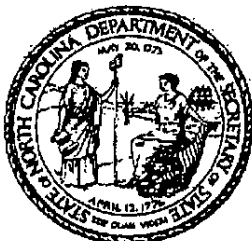
CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

KC CROMWELL, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 13th day of September, 2005, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has not been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 9th day of June, 2014.

Elaine F. Marshall

Secretary of State