

F14000002488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

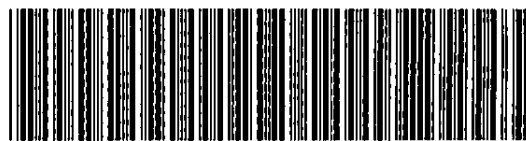
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

013-017-

W14000026025



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04/22/14--01014--013 **78.75

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14 JUN -5 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/10/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LakeShore CRANE Rental, INC dba LakeShore
Name of corporation - must include suffix CRANE SERVICES

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:

Barbara Lutes
Name of Person
LakeShore CRANE Rental INC
Firm/Company
4339 Worthington Circle
Address
Palm Harbor, FL 34685
City/State and Zip code
barbph2@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Lutes at (727) 465-7015
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

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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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2014

BARBARA LUTES
4339 WORTHINGTON CIRCLE
PALM HARBOR, FL 34685

SUBJECT: LAKESHORE CRANE SERVICES, INC. DBA LAKESHORE CRANE
SERVICES
Ref. Number: W14000026025

We have received your document for LAKESHORE CRANE SERVICES, INC.
DBA LAKESHORE CRANE SERVICES 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 person designated as registered agent in the document and the person
signing as registered agent must be the same.

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 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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 014A00010391

RECEIVED

14 JUN -5 AM 11:23

TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2014

BARBARA LUTES
4339 WORTHINGTON CIRCLE
PALM HARBOR, FL 34685

SUBJECT: LAKESHORE CRANE SERVICES, INC. DBA LAKESHORE CRANE
SERVICES
Ref. Number: W14000026025

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

We are enclosing the proper form(s) with instructions for your convenience.

The name listed in number one of the application must be identical to the name
listed in the certificate of existence.

Entities may file using only the entity's name. Please delete any reference to the
"doing business as name" in your document. If you wish to register your fictitious
name, you may do so by filing an application and submitting the appropriate fees
to this office.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 914A00008759

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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. LAKE SHORE CRANE RENTALS, 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. STATE OF INDIANA 3. 61-1404855
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/22/02 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 4/1/2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4339 WORTHINGTON Circle PALM HARBOR, FL
(Principal office address)

Same
(Current mailing address)

8. consultation / advisement
(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: Ronald Lutes

Office Address: 21018 Ayers Rd
Brooksville, FL, Florida 34604
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Ron Lutes
(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

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Chairman: N/A 14 JUN -5 PM 2:47

Address: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Barbara Lutes

Address: 4339 Worthington Circle
Palm Harbor, FL 34685

Vice President: Darryl Lutes

Address: 4339 Worthington Circle
Palm Harbor, FL 34685

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Barbara Lutes
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. Barbara Lutes
(Typed or printed name and capacity of person signing application)

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

LAKESHORE CRANE RENTALS, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 22, 2002, and was in existence or authorized to transact business in the State of Indiana on April 18, 2014.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighteenth Day of April, 2014.

Connie Lawson

Connie Lawson, Secretary of State

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