

5/30/2014

F14000002793

Florida Department of State

Division of Corporations
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ATTN: JESSICA

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To:

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

From:

Account Name : APT PROCESSING
Account Number : I20110000069
Phone : (954) 567-0013
Fax Number : (954) 567-3401

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

Email Address: Annette@api.processing.com**FOREIGN PROFIT/NONPROFIT CORPORATION****NRM Renovations, Inc.**

Certificate of Status	0
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14 JUN 27 AM 9:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NRM Renovations, Inc.

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

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

2. California

46-2352702

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

(FBI number, if applicable)

4. 02/05/2013

Perpetual

(Date of incorporation)

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

6. June 2014

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

7. 317 Plantation Club Drive, Debary, FL 32713

(Principal office address)

317 PLantation Club Drive, Debary, FL 32713

(Current mailing address)

8. Building Contractor License

(Purpose(s) of corporation authorized to transact business in state of Florida)

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

Name: Nathan Robert Moore

Office Address: 317 Plantation Club Drive

Debary

(City)

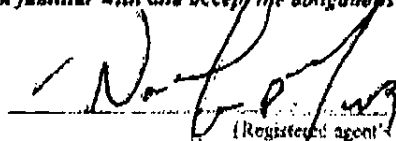
Florida

32713

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Nathan Robert MooreAddress: 317 Plantation Club DriveDebary, FL 32713

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Nathan Robert Moore

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. Nathan Robert Moore

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

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State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

NRM RENOVATIONS, INC.

FILE NUMBER: C3544301
FORMATION DATE: 02/05/2013
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of May 20, 2014.

DEBRA BOWEN
Secretary of State

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TALLAHASSEE, FLORIDA

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