## F14000003992

(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



300263427633

09/22/14--01018--010 \*\*70.00

4 SEP 22 PM P2 15

9/23/14 11

## **COVER LETTER**

TO: New Filing Section Division of Corporations				
SUBJECT: On Site Home Solutions  Name of corporation - must include suffix				
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:				
Christine M. Cairney Name of Person				
Name of Person				
Firm/Company				
13638 Lagoon Dr.				
Address				
Hudson FL 34667				
City/State and Zip code				
13638 Lagoon Dr.  Address  Hudson FL 34667  City/State and Zip code  Christine Oonsitehomesolutions. Com  E-mail address: (to be used for future annual report notification)				
E-man address. (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Christing M. Pairney 222 242 1239				
Christine M. Cairney at (727) 243-1239  Name of Person Area Code & Daytime Telephone Number				
The course of th				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
New Filing Section New Filing Section Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32314				
Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\Boxed{\sigma} \$78.75 Filing Fee & Certificate of Status \$\Boxed{\sigma} \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certified Copy \$\Boxed{\sigma} \$\Boxed{\sima} \$\sigma				

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. <u>On Site Home Solutions</u> , <u>Inc</u> (Enter name of corporation; must include "INCORPORATED," "COMPANY." "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")		<del></del>
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busing the second		a)
(State or country under the law of which it is incorporated) (FEI number, if applicab	le)	
4. 8-27-2014 5. Derpetual' (Date of incorporation) (Duration: Year corp. will cease to exist	)	
(Date of incorporation) (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. 13638 Lagoon Dr., Hudson FL 34667 (Principal office address)		
(Principal office address)		
(Current mailing address)		
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	130 E	•
· · · · · · · · · · · · · · · · · · ·	h	
121-25 1 ann DC		7
Office Address: 19038 Lagon Dr.	THE WALL	ڌ
Hudson , Florida 34667 (City) (Zip code)		<del>-</del> n
(City) (Zip code)	.#*	
9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated cor designated in this application, I hereby accept the appointment as registered agent and agree to further agree to comply with the provisions of all statutes relative to the proper and complete pe duties, and I am familiar with and accept the obligations of my position as registered agent.	act in this c	apacity. I
Mistine M. Cairry (Registered agent's signature)		

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.

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

A. DIRECTORS	
Chairman: Christine M. Cairney	
Address: 13038 Lagoon Dr.	
Vice Chairman:	
Address:	
Director:	
Address:	<u>.                                    </u>
<del></del>	
Director:	· ~ 4
Address:	F. 5
	) 변 (제 : 1명 : 1
B. OFFICERS	8.22
President: Christine M. Cairney	
Address: 13638 Lagoon Dr.	
Hudson FY 24667	्री. UI
Lawrence Paigness	
12/20/1	
41 1 2000	
Secretary: Christine M. Cairney	
Address: 13638 Laguon Dr. Hudson	FL 34667
Treasurer: Christine M. Cairney	
12/20/	10 F1 34667
Address: 13638 Lagour Vr., Hudse	720/00/
NOTE: If necessary, you may attach an addendum to the applicat	ion listing additional officers and/or directors.
12. Mistine M. Cauxy Signature of Director of	r 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 submitte a third degree felony as provided for in s.817.155, F.S.	d in a document to the Department of State constitutes
13. Mrishne M. Lairney	Prosident
(Typed or printed name and capacity of po	erson signing application)

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ONSITE HOME SOLUTIONS, INC, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 27, 2014, and is in good standing in this state.

and the op-

ROSS MILLER Secretary of State

office on September 15, 2014.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20140915-2812
You may verify this electronic certificate
online at http://www.nysos.gov/