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Special Instructions to Filing Officer:			
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07/21/15--01011--007 \*\*650.00

06/29/15--01005--021 \*\*78.75

15 JUL 13 PM 2: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED
15 JUL 13 PH 2: 54
STATE OF STATE

J. HARRIS

### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Surface MA	rke inc.	
	tion - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and check are sub	
Please return all correspondence concerning this ma	atter to the following:	
Robin Du	SON	
	of Person	
Surface Connei	Ction	
Firm/C	Company	
2175 Manana		
	ddress 220	
robin Surface	te and Zip code  CONNECTION  ed for future annual report r	com
For further information concerning this matter, plea	ı	ottiication)
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KODIN DUSON at 87	7,573-60	170
	ea Code & Daytime Telepho	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING Al New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction prorations
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

July 1, 2015

ROBIN DYSON 2175 MANANA DRIVE DALLAS, TX 75220

SUBJECT: SURFACE WORKS, INC

Ref. Number: W15000044714

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

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 615A00013765

15 JUL 13 PH 2: 54

#### '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. (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) (State or country under the law of which it is incorporated) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent, LLC Name: 3030 N. Rocky Point Dr, STE 150A Office Address: Tampa (City) 9. 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)

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: **B. OFFICERS** Vice President: Address: \_ Address: \_ Treasurer: \_ NOTE: If necessary, you may attach an addendam to the application listing additional officers and/or directors. 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. 13. \_\_\_\_\_

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



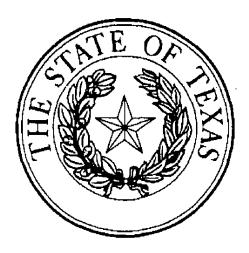
## Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for SURFACE WORKS, INC. (file number 154122600), a Domestic For-Profit Corporation, was filed in this office on June 30, 1999.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 22, 2015.



Carlos H. Cascos Secretary of State

Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services