

F15000004059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

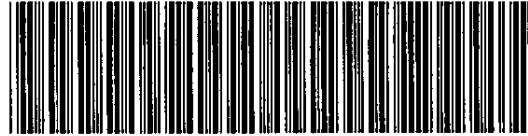
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Special Instructions to Filing Officer:

Signature W1560397

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2015 SEP 14 P 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 15 2015

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2015

EDWARD J. SERRA
6118 W. CORPORATE OAKS DRIVE
CRYSTAL RIVER, FL 34429

SUBJECT: CUNNINGHAM 12, INC.
Ref. Number: W15000060397

We have received your document for CUNNINGHAM 12, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 815A00019353

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CUNNINGHAM 12 INC

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:

EDWARD J SERRA

Name of Person

EDWARD J SERRA CPA PLLC

Firm/Company

6118W CORPORATE OAKS DRIVE

Address

CRYSTAL RIVER, FL 34429

City/State and Zip code

ed@edserracpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWARD J SERRA

352

794-3879

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

**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. CUNNINGHAM 12 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. VERMONT 3. 27-0263958
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05-22-2009 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. SEPTEMBER 3, 2015
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6100 W OST-WEST ST HOMOSASSA, FL 34446
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: EDWARD J SERRA CPA

Office Address: 6118 W CORPORATE OAKS DRIVE

CRYSTAL RIVER, FL , Florida 34429
(City) (Zip code)

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: SHELLY M CUNNINGHAMAddress: 6100 W OST-WEST STREETHOMOSASSA, FL 34446Vice President: KARL CUNNINGHAMAddress: 6100 W OST-WEST STREETHOMOSASSA, FL 34446

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. SHELLY M CUNNINGHAM
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. SHELLY M CUNNINGHAM

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

CUNNINGHAM 12, INC.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on May 22, 2009.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

September 03, 2015

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital.



James C. Condos

James C. Condos
Vermont Secretary of State

Business ID: 0130016
Certificate Number: 2013182651001