

F15000005584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

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2015 DEC 16 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
DEC 17 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2015

MARIA STONEY
ARTISAN FINANCIAL SERVICES, INC.
6340 SUGARLOAF PKWY, STE. 200
DULUTH, GA 30097

SUBJECT: AUTO WASH CONSULTANTS, INC
Ref. Number: W15000077800

RECEIVED
15 DEC 16 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for AUTO WASH CONSULTANTS, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 015A00025229

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUTO WASH CONSULTANTS, 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:

MARIA STONEY

Name of Person

ARTISAN FINANCIAL SERVICES, INC

Firm/Company

6340 SUGARLOAF PKWY, SUITE 200

Address

DULUTH, GA 30097

City/State and Zip code

MARIA.STONEY@AOL.COM

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

For further information concerning this matter, please call:

MARIA STONEY

678

474-9997

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. AUTO WASH CONSULTANTS, 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. GEORGIA 3. 20-2819164
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05-23-05 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 10-01-15
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1011 PALMETTO DUNES DR. JOHNS CREEK, GA 30097
(Principal office address)

(Current mailing address, if different)

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

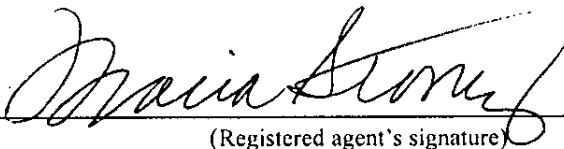
Name: MARIA STONEY

Office Address: 5008 PALOMA DR

TAMPA, Florida 33624
(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: SCOTT OSTER

Address: 1011 PALMETTO DUNES
JOHNS CREEK, GA 30097

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SCOTT OSTER

Address: 1011 PALMETTO DUNES DR
JOHNS CREEKS, GA 30097

Vice President: SCOTT OSTER

Address: 1011 PALMETTO DUNES DR
JOHNS CREEK, GA 30097

Secretary: MARIA CHRISTINE OSTER

Address: 1011 PALMETTO DUNES DR, JOHNS CREEK, GA 30097

Treasurer: SCOTT OSTER

Address: 1011 PALMETTO DUNES, JOHNS CREEK, GA 30097

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

12. 

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. SCOTT OSTER

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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Control Number : 0536716

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

AUTO WASH CONSULTANTS, INC

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

| | |
|---------------------|--------------|
| Docket Number | : 12239955 |
| Date Inc/Auth/Filed | : 05/23/2005 |
| Jurisdiction | : Georgia |
| Print Date | : 12/16/2015 |
| Form Number | : 211 |



B. P. Kemp

Brian P. Kemp
Secretary of State