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	(Requestor's Name)			
	(Address)			
	(Address)			
<u></u>	(City/State/Zip/Phone #)			
PICK-UF	P WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of 9	Status		
Special Instructions	s to Filing Officer:			
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## 21 Robert Pitt Drive Suite 310 • Monsey, NY 10952 • 845.356.8390 • Fax 845.356.8397

#### 12/28/2015

Florida Department of State New Filing Section, Division of Corp. Clifton Building, 2661 Executive Center Circle Tallahassee, FL 32301

### RE: Application By Foreign Corporation For Authorization To Transact Business

To Whom It May Concern:

Enclosed is the Application By Foreign Corporation For Authorization To Transact Business In Florida that was submitted by our customer **M & D K Contractors, Inc.** 

Once the application has been approved please forward evidence of the approval to the following mailing address:

M & D K Contractors, Inc. Attn: Brittany Moore 5280 Webb Parkway, Suite B Lilburn, GA 30047

If there is any issue with the application, or if you require any further information, kindly contact our Business Licensing division directly at the number or address listed below.

Thank you,

Esti Glick

Corporate Associate
Business Licenses, LLC
21 Robert Pitt Drive, Suite 310
Monsey NY 10952
845-356-8390 ext. 213
glicke@businesslicenses.com

# **COVER LETTER**

TO:	Registration Section Division of Corporations			
~	M & D K Contractors Inc	<b>:.</b>	•	
SUB	JECT: Nan	ne of corporation	- must include suffix	
Dear S	Sir or Madam:	·		
"Certi above	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation t	rate of Good Star o transact busine	nding" and check are su ess in Florida.	
	return all correspondence conce ny Moore	erning this matter	to the following:	
		Name of	Person	
М&[	OK Contractors, Inc.			
		Firm/Com	pany	
5280 V	Webb Parkway, Suite B			
		Addre	ess	
Lilbur	n, GA 30047			
		City/State a	nd Zip code	
bmoor	re@mdkcontracting.com			
	E-mail addr	ess: (to be used t	for future annual report	notification)
For fu	rther information concerning thi	s matter, please o	call:	
Edwin	Santos	678	924-3608	
	Name of Person	at ( Area Cod	e Daytime Tele	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	
	0.00 Filing Fee		\$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.

	orporation: must include "INCORPOR orp." "Inc." "Co," or "Corp.")	RATED," "COMPAN	NY," "CORPORATIC	",и(	
(If name unavaila Georgia	able in Florida, enter alternate corpora	ate name adopted for t 27-3423144		ing business in Florida)	
(State or country	y under the law of which it is incorpor  OI O  of incorporation)		(FEI number, if a		
. Upon	Registration (Date first transacted by (SEE SECTIONS 607.1501 away. Suite B, Lilburn, GA 30047	usiness in Florida, if p	prior to registration)		
•	way, Suite B, Lilburn, GA 30047	(Principal office add	iress)		
Name and <u>stree</u>	(Curre et address of Florida registered age InCorp Services, Inc.	ent mailing address, if ent: (P.O. Box <u>NO</u>		15 DEC 31 SECRETARY ALLAHASSE	
ffice Address:	17888 67th Court North  Loxahatchee	, Flor	33470	PM 1:01	Personal Section of the Section of t
	(City)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Zip code)	¥	
laving been nam esignated in this urther agree to co	ent's acceptance: ed as registered agent and to acce application, I hereby accept the a omply with the provisions of all st amiliar with and accept the obliga	appointment as reg tatutes relative to ti	istered agent and ag he proper and comp	gree to act in this capa Nete performance of m	city. I
	C S (Reg	ava BravHj egistered agent's signa	en on beh	alf of In Co Se	rvices

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:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
Edwin A Santos President:	SEC 35
745 Avalon Forest Drive	ARE T
Lawrenceville, GA 30044	188 A 288
Vice President	78 R M
Vice President:	97. A
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.
12. Signature of Director on Officer	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that are true and that he or she is aware that false information submitted in a document to the Depart a third degree felony as provided for in s.817.155, F.S.	
Edwin A Santos	
(Typed or printed name and capacity of person signing application)	•

Control Number: 10062977

# STATE OF GEORGIA

# **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### 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

# M & D K CONTRACTORS, 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 pura-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date

Jurisdiction : Georgia
Print Date : 12/1/2015
Form Number : 211

B: P. Kemp Secretary of State

: 09/07/2010

