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SECRETARY OF STATE
THE HANGE FLORIDA

THE HANGE FLORIDA





March 18, 2016

RADOSLAV TEMELKOSKI 6913 LTC PARKWAY PORT ST. LUCIE, FL 34986

SUBJECT: MOBILE DIRECT FLOORING INC

Ref. Number: W16000020401

We have received your document for MOBILE DIRECT FLOORING 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 the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 116A00005622

SECKELENCY OF STATE
SECKELENCY OF STATE

PILED

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>Mobile Direct Flooring ine</u> 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:
RADOSLAL TEMELKOSKI Name of Person MOBILE DIRECT Flooling Ine Firm/Company
Name of Person
_ MOBILE DIRECT Flooling ine
Firm/Company
Address
PORT St Lucie FL 34986
City/State and Zip code
Kon E mobile Direct Flooling E-mail address (to be used for future annual report notification)
Address PORT St Lycle FL 34986 City/State and Zip code Ron & mobile Direct Flooling E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
PADOS ON Tomelloski , 586 , 419-9001
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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status & Certified Copy ·

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOR	REIGN CORPORATION TO TRA	NSACT BUSINES	S IN THE STATE	OF FLO	RIDA.	•
1	BILE DIRECT FL prporation; must include "INCORPO	<u>ooling</u>	ine.			
"Inc.," "Co.," "Co	orporation; must include "INCORPC orp," "Inc," "Co," or "Corp.")	PRATED," "COMP	'ANY," "CORPOR	ATION,"		
(If name unavailal	ble in Florida, enter alternate corpor	ate name adopted for	or the purpose of trai	nsacting b	usiness in Florida	a)
2. Delaw.	ALE vander the law of which it is incorporate to the law of which it i	3	81-175	1916		
(State or country	under the law of which it is incorpo	orated)	(FEI numbe	r, if applic	cable)	_
4. <u>3/7.</u>	/2016 of incorporation)	5				
(Date	of incorporation)		(Date of duration, if	other tha	n perpetual)	
6	/D / C / 1		10.1		,	
	(Date first transacted (SEE SECTIONS 607.150)	l & 607.1502, F.S.,	to determine penalty	liability)		
7. 6913	Lte PARKUAY	DORT S	t lucie	FL	34986	
		(Principal office a	address)	-		
					SED 36	
	(Cur	rent mailing address	, if different)		器器	-17
8 Name and street	t address of Florida registered ag	ianti (DA Roy N	IOT accentable)		SSA J	
o. Name and street	Daga - 11 a	;cjit. (1.0. box <u>r</u>	<u>чот</u> ассернаоте)		mor 22	111
Name:	KADOSLAV Teme	e1160514°			93 4	
Office Address:	6413 LTC PK	reary			Ş≓ 3	
	RADOSLAV TEME 6913 LTC PR PORT ST LU (City)	cie , FI	orida 3 498	6		
	(City)	,	(Zip code)			
9. Registered age			•			
	ed as registered agent and to accomplication. I beauty					
	application, I hereby accept the omply with the provisions of all.					
duties, and I am fa	imiliar with and accept the oblig	gations of my pos	ition as registered	agent.		
	2.1					
	Ma					
	(R	egistered agent's sig	gnature)		_	
10. Attached is a c	ertificate of existence duly author				very of this app	lication to
the Department of	State, by the Secretary of State of hich it is incorporated.					
unuci tile law 01 WI	men it is incorporated.					

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ____ Vice Chairman: Address: _ Director: _ Director: B. OFFICERS President: RADOSLAV Temelkosus Address: 6913 LTC PARKURY
PORT SH LKGB FL 34986 Vice President: ___ Address: __ Secretary: _ Address: _ Treasurer: NOTE: If necessary, you may attach an addendum 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 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. RADOSIAN Temelkoski

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

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MOBILE DIRECT FLOORING INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MOBILE DIRECT FLOORING INC." WAS INCORPORATED ON THE SEVENTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

76 APR -5 PN 4: 03

Authentication: 201979986

Date: 03-14-16

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