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To:	Division of Corporations Fax Number : (850)617-6383
רוסכי בי ד	Account Name : SUPRRNIZ.COM, INC. Account Number : 120070000160 Phone : (830)444-3124 Fax Number : (305)675-2011
	**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** Email Address:
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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.

Z PAINTING INCORPORATED

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp." "Inc," "Co.," or "Corp.")

(If name unavni)	GEORGIA	ne adopted for the purpose of transacting hosin 3.	
	09-12-2006	(FEI number, if applicabl	
(Date	of incorperation)	5. (Date of duration, if other than po	erpetual)
	(Date first transacted husines (SEE SECTIONS 607.1501 & 607 IVE, LAWRENCEVILLE, GA, 30044	ss in Florida, if prior to registration) 7.1502, P.S., to determine penalty liability)	
	(Pri	ncipal office address)	2011
αμά 100 γ <mark>ματρικρί που προ</mark> τογικός ζ αποτοριτος ποριτοριας τος	(Current pp	ailing address, if different)	NH ES
Name and <u>stree</u> Name:	<u>Laddress</u> of Florida registered agent: (NELSON ZAVALA	(P.O. Box NOT acceptable)	ANCY OF
fice Address:	12350 E. COLONIAL DR		SIN
	ORLANDO	, Florida	
	(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.

х (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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Η.	Names and	business	addresses o	fofficers	and/or	directors:
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Chairman: rest: rest: ctor: ctor:	**************************************	
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Control Number : 0680784

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

Z PAINTING INCORPORATED

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.

14. J.M.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or notra 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.

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Docket Number Date Inc/Auth/Filed Juradiction Print Date Form Number : 14010473 09/12/2006 : Georgia : 02/07/201? 211





