F17000004912

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W17-75857 cus					

Office Use Only



200303308962

09/21/17--01016--004

**87.50

2017100V=1-ANT105-15

K. SALY NOV - 2 2017

COVER LETTER

	gistration Section vision of Corporations			
SUBJEC'	r: Retention	Pond S	Services, Inc	
		Name of corporat	ion - must include suffix	
Dear Sir or	· Madam:			
"Certificat		ificate of Good S	or Authorization to Transactanding" and check are sub iness in Florida.	
Please retu	rn all correspondence co	oncerning this ma	tter to the following:	
	Jar	el Reme	ikas	
			of Person	_
	Keter	thon to	d Servius, I	hc.
	200	\sim	ompany	
	200		LE STYCE T	
	(C)		, NC 284C	3
	<u> </u>	City/Stat	e and Zip code	
	<u> Janela</u>	retent	DOPONS. (ed for future annual report i	-ONA
	E-m hil -a	ddress: (to be use	ed for future annual report i	notification)
For further	information concerning	this matter, pleas	se call:	Į!
	REMEINAS ame of Person	at (<u>ILO</u> Area C	313-6830 Code Daytime Telep	
Re Di Cl 26	REET/COURIER AD gistration Section vision of Corporations ifton Building 61 Executive Center Cirllahassee, FL 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee. F	ection orporations 7
Enclosed is	s a check for the followi	ng amount:		
□ \$70.00		5 Filing Fee & Teate 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. Ketention Pond Services, 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)	
Marin Paralina GI 100, 101	
2. NOI TO (and an analysis) 3. State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 5/7/96	
(Date of incorporation) (Date of duration, if other than perpetual)	
6. 9/20/17	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 2909 Market Street, Wilmington, NC 28403 (Principal office address)	
PO POX 12121 10 11 14 10 10 10 10 10 10 28406	
(Current mailing address, if different)	
	٠,
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: CT Corporation Systems	<u>.</u> .
Office Address: 1200 South Pine Isma Rd.	·
Pontation, Florida 33324	
(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 pla	çe
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete performance of my	į. I
duties, and I am familiar with and accept the obligations of my position as registered agent.	
Christine Kelm	
Assistant Secretary	
(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.

A. DIRECTORS Chairman:	2017 NOY _	LEL.
Address:		AM 10: 52
Vice Chairman:		1/1/05/2
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS President:		
Address: 812 Intet View Dive		
Wilmington, NC 28409		
Address:		
Address:		1
Treasurer:		
NOTE: If negestary, you may attach an addendum to the application listing		rectors.
Signature of Director or Office The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a do a third degree felony as provided for in s.817.155. F.S.	r 11 above) affirms that the fact:	s stated herein
13. (5/60) H (CW) (Typed or printed name and capacity of person sig	gning application)	1



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

RETENTION POND SERVICES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 7th day of May, 1996, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

Elaine I. Marshall

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of September, 2017.

Secretary of State

Certification# 101130307-1 Reference# 14016381-JRS Page: 1 of 1 Verify this certificate online at http://www.sosne.gov/verification



September 21, 2017

JANEL REMEIKAS RETENTION POND SERVICES, INC. 2909 MARKET ST. WILMINGTON, DE 28403

SUBJECT: RETENTION POND SERVICES, INC.

Ref. Number: W17000075837

We have received your document for RETENTION POND SERVICES, INC. and your check(s) totaling \$87.50. 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.

Letter Number: 917A00019202

Karen A Saly Regulatory Specialist II

www.sunbiz.org