# F17000005816

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(Ad	idress)
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(Cit	ty/State/Zip/Phone #)
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(50	isiness Enary Name,
(Da	ocument Number)
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Office Use Only



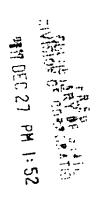
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N. CAUSSEAUX DEC 2 8 2017

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: C+ 6 Al ASSer	HS. INC must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ling" and check are submitted to register the
Please return all correspondence concerning this matter to	to the following:
A :	
Name of P	erson
Carol Moran Name of P  C+6 Al ASSAS TINC  Firm/Comp	
Firm/Comp	any
1.0. Box 1437	
Marco Island, Fl	34146
City/State and	d Zip code
Carol Moran 39 a an E-mail address: (to be used for	nail , Com
For further information concerning this matter, please ca	
Valorie Colin CPA at (310 Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2061 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:	
	S78.75 Filing Fee & S87.50 Filing Fee. Certified Copy Certified Copy



## FLORIDA DEPARTMENT OF STATE

**Division of Corporations** Received 21 -

December 14, 2017

**EAROL MORAN** PO BOX 1437

MARCO ISLAND, FL 34146

SUBJECT: C&G A1 ASSETS, INC.

Ref. Number: W17000098974

We have received your document for C&G A1 ASSETS, 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):

Please list the complete principal office address. — Confused see #8 —

Po box is not acceptable for the principal address, has to be a street address.,

What am I messing -

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 317A00025330

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANC REGISTER A FO	UE WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO OREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	7)
1. C+ (	Corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"lne.," "Co.," "(	Corp.," "Inc." "Co." or "Corp.")	
(It name unavai	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florid	la)
2. <u>Cal</u>		
(State or count	try under the law of which it is incorporated) (FEI number, if applicable)	<del></del>
4. 1/2	1 1 9 98 5. (Date of duration, if other than perpetual)	
(1);(1)	te of incorporation) (Date of duration, if other than perpetual)	
6	Date that transacted business in Florida, if prior to conistration	_
nouling and	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty flability)	
7. <u>7. 1. 0.</u>	DOX 1430 Marco Island FL 34141	
10 011	H: O (Principal office address)	<u>-</u> Λ
Market - B	Hilloway Circle E # 233 Marco Is	land i
	(Chirch hairing address, if different)	127 انہ
8. Name and street	eet address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Carol Moran	
Office Address:	816 Hideaway Circle E #233	(f) (7) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f
	Marco #86 nd . Florida 34145-1880	
	(City) (Zip code)	<b>X</b> ?
9. Registered ago	cnt's acceptance:	. 52
Having been nam	ned as registered agent and to accept service of process for the above stated converging at the	he place
further agree to c	s application. I hereby accept the appointment as registered agent and agree to act in this ca comply with the provisions of all statutes relative to the proper and complete performance of familiar with and accept the obligations of my position as registered agent.	
ι	Carol a Moran	
4-	(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.

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: Carol Moran		
Address: 816 Hideaway Circle & #233		
marco Island FL 34145		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
	7	燕
B. OFFICERS	33	<u>च</u> ्चित्र इ.स.च
President: Carol Movan	527	
Address: Same as above	PX	- 1
	<del></del>	
Vice President:		<b>;</b>
Address:	· · · · · · · · · · · · · · · · · · ·	
		<del></del>
Secretary: Carol Moran		
Address: Same as above		
Treasurer: Caro Movan		<del>-</del>
Address: Same as above		
		<del></del>
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directly.	tors.	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stare true and that he or she is aware that false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.	ated herei	in tes
13. <u>Carol Moran President</u>		
(Typed or printed name and capacity of person signing application)		<del></del>

## State of California Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

C&G A1 ASSETS, INC.

FILE NUMBER:

C2023959

FORMATION DATE:

01/02/1998

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)



I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 30, 2017.

ALEX PADILLA Secretary of State