

F18000000979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

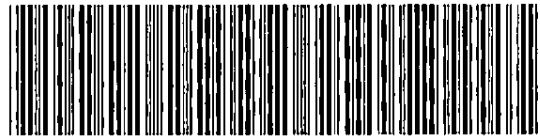
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

cert  
win 48971

Office Use Only



900300113749

06/08/17--01008--013 \*\*70.00

FILED

18 FEB 23 AM 9:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. SIMMONS

FEB 22 2018

COVER LETTER

RECEIVED

FEB 23 2013

TO: Registration Section  
Division of Corporations

SUBJECT: ProCraft Exteriors, Inc. W17000048971  
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:

Susan Unwin

Name of Person

ProCraft Exteriors

Firm/Company

11939 Manchester Rd #144

Address

St. Louis, MO 63131

City/State and Zip code

susan@procraftmo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Unwin

Name of Person

at ( 314 )

Area Code

965-2353

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 &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

*You already  
have the fee*

*OS*

**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. Procraft Exteriors Inc. W1700048971  
(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)
2. Wyoming 3. 27-1902453  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/2/2010 5. Indefinite  
(Date of incorporation) (Date of duration, if other than perpetual)
6. 6/9/2017  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 11939 Manchester Rd #144 St. Louis MO 63131  
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Susan Unwin

Office Address:

1759 San Marco Rd

Marco Island

(City)

, Florida 34145

(Zip code)

FILED  
18 FEB 23 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place  
signated 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.*

Susan Unwin

(Registered agent's signature)

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to  
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: Christopher Smith

Address: 11939 Manchester Rd #144

St. Louis MO 63131

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Christopher Smith

Address: 11939 Manchester Rd #144

St. Louis MO 63131

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

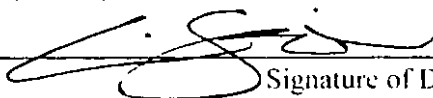
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**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.

Christopher Smith, president

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

FILED  
18 FEB 23 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W17000048971

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, KAREN L. WHEELER, ACTING SECRETARY OF STATE of the STATE OF WYOMING,  
do hereby certify that according to the records of this office,

**ProCraft Exteriors Inc.**

is a

**Profit Corporation**

formed or qualified under the laws of Wyoming did on **February 2, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000579794**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of February, 2018 at 8:37 AM. This certificate is assigned 025624628.



*Karen L. Wheeler*

Acting Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyobiz.wy.gov> and following the instructions displayed under Validate Certificate.

