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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Dc	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Koster Construction Coo, Inc. 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:
Donald Koster. Name of Person
Koster Construction Co., Inc.
2515 5. A+LANTIC AUE # 1010 Address
Daytona Beach Shores, FL. 32118 City/State and Zip code
GKoster 55@gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Don ALD Kostev at (612) 801-4981 Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Clifton Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee & 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.

(FEI number, if applicable) (Date of duration, if other than perpetual)
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ida, if prior to registration) .S., to determine penalty liability) Daylona Beuch Shores, Flace address)
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* NOT acceptable) ***IDIO

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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.

Donald Koster (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: Vice Chairman: Director: _ **B. OFFICERS** President: Donald Koster Address: 2515 5- Atlantic Ave # 1010 DAYtonA BEACH Shores FL. 32118 Vice President: Secretary: VALERIC Koster Address: 2515 S. Atlantic Ave. # 1010, Daytona Beach Shores FL. 32118 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. 13. Donald Kester President

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

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Date: 6/6/2018

Name: KOSTER CONSTRUCTION CO., INC. (490 DP - 23482)

Date of Incorporation: 11/27/1978

Duration: PERPETUAL

- I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. Articles of dissolution have not been filed.

Certificate ID: CS151060

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State