10/18/2018



Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

: (323)962-3889 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION METAL BUILDING RESTORATION INC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: METAL BUILDING RESTORATION INC	
(Name of corporation - must include suffix)	3
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Busin "Certificate of Existence," and check are submitted to register the above referenced for transact business in Florida.	ness in Florida."
Please return all correspondence concerning this matter to the following:	;
Cheyenne Moseley	<u> </u>
(Name of Person)	
Legalzoom.com, Inc.	
(Firm/Company)	
101 N. Brand Blvd 11th Floor	
(Address)	
Glendale, CA 91203	
(City/State and Zip code)	
For further information concerning this matter, please call:	
Cheyenne Moseley at (800) 773-0888ext9724	
(Name of Person) (Area Code & Daytime Telephone No	imber)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 3239	tions
Enclosed is a check for the following amount:	
Certificate of Status 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.

"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")			
(If name unavail	able in Florida, enter alternate corporate na	ime adopted for the purpose of transacting busine	ss in Florida)	
Kansas		27-0840803 3.		
	y under the law of which it is incorporated			
ļ, <u> </u>		5.	3.	
(Date	of incorporation)	(Date of duration, if other than per	petual)	:7
)		-	() !	
	(SEE SECTIONS 607.1501 & 60	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	ţ	,1
10710 W 176 Te	race, Overland Park, KS 66221	-	> '	,,
*	(Pri	incipal office address)	<u>ر</u> 2	',ی
	(Current met address of Florida registered agent: Brendan Doyle	(P.O. Box NOT acceptable)	-	
Name: Office Address:	1637 Olmsted Ln			
	Fernandina Beach	32034 , Florida		
	(City)	(Zip code)		
	ent's acceptance: ned as registered agent and to accept s application, I hereby accept the appo	service of process for the above stated corpo pintment as registered agent and agree to ac tes relative to the proper and complete perfo	t in this capa	city.

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.



To: Page 6 of 6

11. Names and business addresses of officers and/or directors:

A. DIRI	ECTORS		
Chairman	:		
Address:			
			
Vice Chai	rman:		
Address:			
-	John Conti		
Director:	6 Hilliop Rd		
Address:	Katonah, NY 10536		
		1	_ ****
		ಬು	ה
Address:		>	
B. OFF	ICERS	رم	
President	John Conti	=	
Address:	6 Hilltop Rd		
	Katonah, NY 10536		
Vice Pres	John Conti		
Address:	6 Hilliop Rd		
	Katonah, NY 10536		
Secretary	John Conti		<u> </u>
Address:	6 Hilliop Rd, Katonah, NY 10536		
Treasurer	John Conti		
Address:	6 Hilltop Rd, Katonah, NY 10536		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and	or directors	5.
12	Gas Conti		
are true a third d	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that the and that he or she is aware that false information submitted in a document to the Departmen legree felony as provided for in s.817.155, F.S. in Conti, President	e facts state t of State o	d herein onstitutes
13	(Typed or printed name and capacity of person signing application)		

https://www.kansas.gov/bess/flow/main?execution=e2s1

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6360598

Entity Name: METAL BUILDING RESTORATION INC

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: RUSS CAIN

Registered Office: 10710 W 176th Terrace, OVERLAND PARK, KS 66221

was filed in this office on August 28, 2009, and is in good standing, having fully complied

with all requirements of this office.

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



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 18, 2018

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 1083330 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.