

To: Page 1  
4/24/2019

2019-05-02 11:03:29 CST

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Florida Department of State  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**SUSAN L. LACHANCE, CPA, P.C.**

Certificate of Status	0
Certified Copy	0
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May 2, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SUSAN L. LACHANCE, CPA, P.C.  
REF: W19000040437

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

On line #1, place the name exactly how it is on the certificate of existence. On the alternate name line, place the name exactly how it is on the certificate of existence along with a corporate suffix.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6052.

Brooke N Kinsey  
Regulatory Specialist II  
Amount charged: 70.00

FAX Aud. #: H19000134387  
Letter Number: 519A00008797

# 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. SUSAN L. LACHANCE, CPA, P.C.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

SUSAN L. LACHANCE, CPA, P.C., CORP

(if name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Vermont 3. 03-0367047  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
4. 08/01/2000 5.  
(Date of incorporation) (Date of duration, if other than perpetual)

6. (Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

7. 6075 Fairway Court, Naples, FL 34110  
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 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 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.

C T Corporation System

Christine Keim  
Assistant Secretary

By: Christine Keim  
(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.

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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

## A. DIRECTORS

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

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

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

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

Director: Susan L. Lachance

Address: 6075 Fairway Court

Naples, FL 34110

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

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

## B. OFFICERS

President: Susan L. Lachance

Address: 6075 Fairway Court

Naples, FL 34110

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

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

Secretary: Susan L. Lachance

Address: 6075 Fairway Court, Naples, FL 3411

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

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Susan L. Lachance  
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. Susan L. Lachance President

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

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19 APR 24 AM 5:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF VERMONT  
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

SUSAN L. LACHANCE, CPA, P.C.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on Aug 01, 2000.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

April 22, 2019

Given under my hand and seal of office at Montpelier, the State Capital.

*James C. Condos*

James C. Condos  
Vermont Secretary of State



Business ID: 0120718  
Certificate Number: 2013606501001