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O THE SERVICE

#### **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations						
MCP Services Inc.						
SUBJECT:	_ <del></del> .					
	Name of corporat	ion - mu	ist include suffix			
Dear Sir or Madam:						
The enclosed "Application by Fore "Certificate of Existence," or "Cer above referenced foreign corporations of the corporation	tificate of Good S	Standing	" and check are sub			,,
Please return all correspondence e Lillian Phelps	oncerning this ma	itter to th	ne following:			
	Name	of Perso	nn		<del></del>	<del></del>
MCP Services Inc.						
	Firm/C	Company				
10005 Bradwell Pl	ridux	ompany				
	A	ldress		<del> </del>		
Татра, FL. 33626						
	City/Stat	a and 7	n anda			
lphelps@mcpservice.com	Cityrstat	e and za	peode	-	2019 hus	
E-mail:	address: (to be us	ed for fu	ture annual report n	otification)	3	T 72.7
For further information concerning	g this matter, plea	se call:			629	ا پيدوء م
Lillian Phelps	678	<u>:</u>	521-4444	1	PH 4	
Name of Person	at ( Area (	Code	Daytime Teleph	none Number	16	
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301			MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations		
Enclosed is a check for the following	ng amount:			0		
	5 Filing Fee & ficate of Status		3.75 Filing Fee & rified Copy	\$87.50 F Certifica Certified	iling Feate of State Copy	ż, atus &

#### 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.

MCP Services I		001 (0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
	orporation; must include "INCORPORATED," " orp," "Inc," "Co." or "Corp.")	COMPANY, "CORPORATION	N,
11101, 601, 61	orp, me, co. or corp. /		
	ble in Florida, enter alternate corporate name add	opted for the purpose of transacting 3-0507511	ng business in Florida)
Georgia			
(State or country 06/15/2009	y under the law of which it is incorporated)	(FEI number, if applicable)	
·	5		<del></del>
(Date	of incorporation)	ration) (Date of duration, if other than perpetual)	
<del>-</del>	(Date first transacted business in F	orida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502		lity)
-	Pkwy, Suite 209-211, Lawrenceville, GA, 30044		,
7			
10005 Destaudi		office address)	
10005 Bradwell	Pl, Tampa, Fl 33626		
	(Current mailing a	ddress, if different)	
	, ,	,	
Name and stran	t address of Clarida assistanted assaut. (D.O.)	Dan MOT - constable	20
. Name and stree	t address of Florida registered agent: (P.O. I Lillian Phelps	30x <u>NOT</u> acceptable)	: 5
Name:	raman rheips		2019 AUG
	10005 Bradwell Pl	_	. 2
Office Address:			: 9
	Tampa	33626	/ 구 :
		, Florida	- PH 4:
	(City)	(Zip code)	, - <u>-</u>
			6

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.

(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 Lillian Phelps Chairman: 10005 Bradwell Pt, Tampa, FL, 33626 Address: Lillian Phelps Vice Chairman: 10005 Bradwell Pl, Tampa, FL, 33626 Lillian Phelps Director: 10005 Bradwell Pl, Tampa, FL, 33626 Address: Lillian Phelps Director: 10005 Bradwell Pl, Tampa, FL 33626 Address: **B. OFFICERS** Lillian Phelps 10005 Bradwell Pl, Tampa, FL, 33626 Address: \_ Lillian Phelps Vice President: 10005 Bradwell Pl, Tampa, FL, 33626 Address: \_ Lillian Phelps Secretary: 10005 Bradwell Pl, Tampa, FL, 33626 Address: Lillian Phelps Treasurer: 10005 Bradwell Pl, Tampa, FL, 33626 Address: NOTE: If necessur you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer of 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.

Lillian Phelps

13. \_\_\_

Control Number: 09042746

## STATE OF GEORGIA

## **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# MCP SERVICES INC. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 17609833 Date Inc/Auth/Filed : 06/15/2009 Jurisdiction : Georgia Print Date : 08/28/2019

Form Number : 211



13 1200

Brad Raffansperger

**Brad Raffensperger**Secretary of State