

F19000005203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

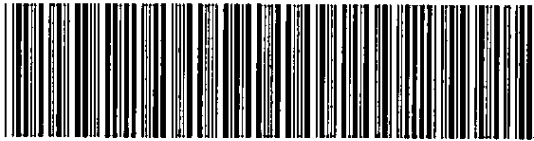
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations
ANY MOMENT PLUMBING INC

SUBJECT: _____
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:
ELIAS AZZOUZ

AZZ INC TAX & ACCOUNTING	Name of Person
100 N POND DR. SUITE A	Firm/Company
WALLED LAKE, MI 48390	Address
ELI@AZZINC.COM	City/State and Zip code
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

ELIAS AZZOUZ	248	926-0008
_____	at (_____)	_____
Name of Person	Area Code	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

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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.

ANY MOMENT PLUMBING INC

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

ANY MOMENT PLUMBING OF FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
MICHIGAN 81-1573335

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
02/19/2016

4. _____ 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, F.S., to determine penalty liability)
22650 OTTER RD, NEW BOSTON, MI 48164

7. _____
(Principal office address)
100 N POND DR, SUITE A, WALLED LAKE, MI 48390

(Current mailing address, if different)

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

AUSTIN MOLTER

Name: _____

7874 10TH AVE S


Office Address: _____

SAINT PETERSBURG 33707
_____, Florida _____

(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.



(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

AUSTIN MOLTER ✓

Chairman:

22650 OTTER RD

Address:

NEW BOSTON, MI 48164

KATELYNN MOLTER ✓

Vice Chairman:

22650 OTTER RD

Address:

NEW BOSTON, MI 48164

Director:

Address:

Director:

Address:

B. OFFICERS

AUSTIN MOLTER ✓

President:

22650 OTTER RD

Address:

NEW BOSTON, MI 48164

KATELYNN MOLTER ✓

Vice President:

22650 OTTER RD

Address:

NEW BOSTON, MI 48164

KATELYNN MOLTER ✓

Secretary:

22650 OTTER RD, NEW BOSTON, MI 48164

Address:

AUSTIN MOLTER ✓

Treasurer:

22650 OTTER RD, NEW BOSTON, MI 48164

Address:

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

12. _____

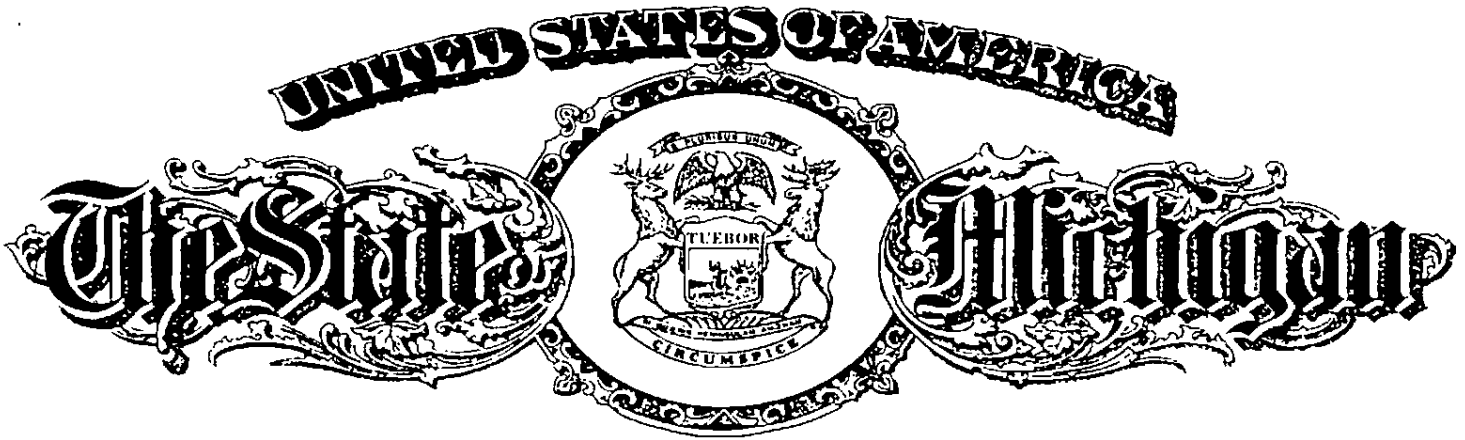
Austin Molter / *Katelynn Molter*
Signature of Director or Officer

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.

AUSTIN MOLTER (PRESIDENT)

13. _____

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



Department of Licensing and Regulatory Affairs

Lansing, Michigan

2019 NOV -4 PM 10:41

This is to Certify That

ANY MOMENT PLUMBING INC

was validly incorporated on February 22, 2016 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 25th day of October, 2019.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 19106406140