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To:			
	Division of Corporations Fax Number : (850)617-6383		
From:	Account Name : I.N.C. CORPORATE	SERVICES	
	Account Number : 120000000011		
	Phone : (718)888-7773 Fax Number : (718)888-8559		
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COVER LETTER

TO: **Registration Section Division of Corporations**

KB Federal Maintenance, 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:

Ariana Kim

	Name of P	erson	
INC Corporate Services			
· · · · · · · · · · · · · · · · · · ·	Firm/Com	bany	
45-04 162nd Street, Suite 203			
<u> </u>	Addre	\$\$	
Flushing, NY 11358			
	City/State ar	d Zip code	
cs@incfilings.com			
E-mail a	address: (to be used fo	or future annual report no	tification)
For further information concerning			
Ariana Kim	at (888-7773	
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	etion rporations
Enclosed is a check for the followi Please make check payable to: FLOR \$70.00 Filing Fee \$\Box\$ \$78.7 Certi	IDA DEPARTMENT	OF STATE \$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.

KB Federal Maintenance, Inc.

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

New York		3. 46-0	534208		
(State or country	(State or country under the law of which it is incorporat		(FEI number, if applicable)		
June 7, 2012		5.			
(Date of incorporation)		(Date of duration, if other than perpetual)			
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60			oility)	
350 Northern Bly	d., Suite 201, Great Neck, NY 11021				
	(Principal	office str	eet address)		
	(Current nu	ailing add	ress. if different)		
	<u>et address</u> of Florida registered agent: (Registered Agents Inc.	(P.O. Bo	x <u>NOT</u> acceptable)	2020 JAN Second	
Name:	t address of Florida registered agent: (Registered Agents Inc. 7901 4th Street N, Suite 300	(P.O. Bo	x <u>NOT</u> acceptable)	2020 JAH LI Segnetany Nel-Ahassee	
	Registered Agents Inc.	(P.O. Bo	x <u>NOT</u> acceptable)		

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.



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.

Α.	DIRECTORS

□Chairman	Bin Kim Name:	□ Chairman	Name:	
□Vice Chairman	100 Glenwood Road, #B Address:	□Vice Chairman	Address:	
Director	Roslyn, NY 11576	Director		
President		President		
□Vice President		□Vice President		
Secretary	□Treasurer			□Treasurer
Other	① Other	Other	<u>.</u>	Other
[] Chairman	Name:	□ Chairman	Name:	
□Vice Chaimnan	Address:	🗆 Vice Chairman	Address:	
Director	······	Director		<u> </u>
President		□President		
☐Vice President		□Vice President	<u> </u>	
Secretary	Treasurer	Secretary		□Treasurer
□Other	Other	□Other		□ Other
□ Chairman	Name:	🗆 Chairman	Name:	
□Vice Chaimnan	Address:	□Vice Chairman	Address:	
Director		Director		
President		President		
□Vice President		□Vice President		
Secretary	Treasurer	Secretary		Treasurer
Other	Other	Other		🗆 Other
Important Notice:	Use an attachment to report more than six (6). The atta	chment will be imag	ed for reporting p	urposes only. Non-indexed

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. Bin Kim, President

State of New York } ss: **Department of State**

I hereby certify, that the Certificate of Incorporation of KB FEDERAL MAINTENANCE, INC. was filed on 06/07/2012, under the name of KB CLEAN & SHINE CLEANING SERVICE INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment KB CLEAN & SHINE CLEANING SERVICE INC., changing its name to KB FEDERAL MAINTENANCE, INC., was filed 12/13/2017.



Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of January two thousand and twenty.

Branden C. Hughan

Brendan C. Hughes Executive Deputy Secretary of State

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