

(Requestor's Name)		
(A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(B	usiness Entity Nam	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	_
WYYY	29692	

Office Use Only



000342152850

04/06/20--01013--002 **150.00

08/18/20--01092--029 ++70.00

020 AFR -2 PH 12: 35

T GLASS APR 0 6 2020



March 20, 2020

FRANK R. GUTIERREZ, CPA 4325 DEL REY BLVD. LAS CRUCES, NM 88012 US

SUBJECT: TMC DESIGN CORPORATION

Ref. Number: W20000029692

We have received your document for TMC DESIGN CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$150.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tacarri K Glass Regulatory Specialist II

Letter Number: 520A00006144

RECEIVED

APR 0 2 2020

COVER LETTER

то:	Registration Division of	n Section Corporations				
SUBJ	ECT:	TMC Design Corporation				
		Name of corpo	ration - mu	ist include suffix	···	
Dear S	ir or Madam	:				
"Certif	icate of Exis	lication by Foreign Corporatio tence," or "Certificate of Good reign corporation to transact b	d Standing	and check are sub-	et Business in Fl mitted to registe	orida," r the
Please	return all cor	respondence concerning this r	natter to th	e following:		
Frank F	R. Gutierrez, C	PA				
		Nar	ne of Perso	on		
TMC D	esign Corpora	ition				
	<u>-</u>	Firm	ı/Company	,		2
4325 D	el Rey Blvd.					020 j
		_	Address			:-J
Las Cru	ices, NM 880	12				2
			tate and Zi	p code	<u>.</u>	P
fgutierr	ez@tmcdesigt			<u> </u>		PH 12: 3:
		E-mail address: (to be	used for fu	ture annual report n	otification)	35
For fur	ther informat	ion concerning this matter, ple	case call:			
Marisa	Munoz	at (;)	382-4607		
	Name of Pe	erson Area	Code	Daytime Teleph	one Number	_
	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ection rporations			
Please n		for the following amount: yable to: FLORIDA DEPARTM S78.75 Filing Fee & Certificate of Status	□ \$78	STATE .75 Filing Fee & tified Copy	S87.50 Fil Certificate Certified (of Status &

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,

TMC Design C	Corporation			
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	,	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	ousiness in Florida)	
New Mexico 3.		85-0449462		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. 12/26/1997	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6. 05/03/2019				
544 Wilmington		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
		ice street address)		
4325 Del Rey Bl	vd., Las Cruces, NM 88012	ice sirett address)	2020	
	(Current mailir	ng address, if different)	2020 AF ?	
8. Name and street Name:	Edward V. Petrow	D. Box <u>NOT</u> acceptable)	-2 PH2: 35	
Office Address:	544 Wilmington Cir		5	
	Oviedo	, 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.



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.

A. DIRECTORS	Christopher V. Ham		Scott J. Peterson	
□ Chairman	Name: 4325 Del Rey Blvd	□Chairman □Vice Chairman	Name:4325 Del Rey Blvd. Address:	
□ Vice Chairman	Address:			
□Director	Las Cruces, NM 88012	Director	Las Cruces, NM 88012	
■ President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary	Treasurer	
□Other	Other	Other	Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary	□Treasurer	
□Other	Other	□Other	□Other <u>22</u>	
			O APO	
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□Director	12:	
□President		□President	<u> </u>	
□Vice President		□Vice President		
□Secretary	□Treasurer	Secretary	☐Treasurer	
□Other	Other	Other	Other	
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Departme	nt of State Annual R	eport form.	
12	Signature of Director o	r Officer		
she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in numberalse information submitted in a document to the Departs	ment of State constitu	ates a third degree felony as provided for in	
13.	r V. Ham			



Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

TMC DESIGN CORPORATION 1907658

the above named entity, a Corporation incorporated under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Profit Corporation, under the

Business Corporation Act

53-11-1 to 53-18-12 NMSA 1978

having filed its Articles of Incorporation on December 26, 1997, and Certificate of Incorporation issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: March 9, 2020

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.

Maggie Toulouse Oliver
Secretary of State



Certificate Validation #: 0035342