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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: R. A. & L. WINDOWS A	AND DÓORS COR	P	
	ne of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence," or "Certific above referenced foreign corporation	rate of Good Stand	ling" and check are submitted to regis	
Please return all correspondence conc	erning this matter	to the following:	
ELDER ACOSTA-AGUILAR			
	Name of I	Person	
R. A. & L. WINDOWS AND DOORS CO	ORP		
	Firm/Com	pany	
1825 SW 1st AVE			
Address		~	
CAPE CORAL, FL. 33991			;
	City/State an	d Zip code	
GRBOOKKEEPING15@GMAIL.COM			7
E-mail add	ress: (to be used fo	or future annual report notification)	
For further information concerning thi	s matter, please ca	all:	(३
ELDER ACOSTA-AGUILAR	at (606-1867	
Name of Person	Area Code	Daytime Telephone Number	
Registration Section Division of Corporations The Centre of Tallahassee	Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
Enclosed is a check for the following a Please make check payable to: FLORIDA □ \$70.00 Filing Fee □ \$78.75 F Certifica	DEPARTMENT	\$78.75 Filing Fee & - = \$87.50 F	ate 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,

	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 busin	ess in Florida)	
NEW YORK 3. 82-2908757		82-2908757		
	y under the law of which it is incorporated)	(FEI number, if applicable)		
09/26/2017	5	PERPETUAL		
(Date of incorporation) 12/08/2020		(Date of duration, if other than perpetual)		
1825 SW 1st AV		in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
		fice street address)		
SAME				
	(Current maili	ng address, if different)	1	
Name and stree	et address of Florida registered agent: (P.	() Roy MOT accomplete	`. —	
	G&R BOOKKEEPING SERVICES LLC	or. Dox ixvr acceptance) , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name:	4403 SE 16TH PL STE 3			
ffice Address:			:	
	CAPE CORAL	, Florida	9	
	(City)	(Zip code)	¢ .	
laving been nam esignated in this irther agree to c	ent's acceptance: ed as registered agent and to accept serve application. I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	ment as registered agent and agree to a relative to the proper and complete perf osition as registered agent.	et in this capacity. Formance of my dut	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS					
■ Chairman	Name: ELDER ACOSTA-AGUILAR	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
≡ Director	CAPE CORAL, FL, 33991	Director			
President		□President			
□Vice Presidem		□Vice President			
□Secretary	□Treasurer	□Secretary		□Treasurer	
□0ther		□Other		□Other	
□ Chairman	Name;	□Chairman			
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		∐Director			
□President		□President	-		
CIVice President		∏Vice President			
☐ Secretary	☐ Treasurer	☐ Secretary		□Treasurer	
[]Other	ElOther	□Other		Other	
□Ch airman	Name:	□iChairman	Name:		
	Address:	□Vice Chairman	Address:	***	
□Director		□Director		<u></u>	
□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 attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your florida Department of State Annual Report form. 12. 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 8.817.155, F.S.

ELDER ACOSTA-AGUILAR

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of R.A.& L. WINDOWS AND DOORS CORP was filed on 09/26/2017, 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.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 30th day of November two thousand and twenty.

Braden C Hydra

Brendan C Hughes
Executive Deputy Secretary of State