F24000001457

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W240000 25489

Office Use Only



600422634466

01/26/24--01015--005 **78.75

(j)

2024 JAN 26 AM 2: 13

[]

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kite and Key Wir	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing	inding" and check are submitted to register the
Please return all correspondence concerning this matter	er to the following:
Heidi Fried Dur	f Person
Kite and Key Wi	mpany,
miling - P.O. Box 1898	94 Mason Crt Kingsland
Kingsland Da	31548 and Zip code
Kiteand Keywining Co	
For further information concerning this matter, please	call:
Name of Person at (367 Area Co	
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
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMEN \$\Boxed{\subseteq}\$ \$578.75 Filing Fee & Certificate of Status	T OF STATE □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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.

(If name unavailable in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Florida)
Georgia	3. 205331590
(State or country under the law of which it is incorporate	ted) (FEI number, if applicable)
March 1, 2005 duly 15, 2006	5
(Date of incorporation)	5. (Date of duration, if other than perpetual)
	iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)
(SEE SECTIONS 607 1501 & 6	
• `	• • •
• •	31508
4 Mason Court Kingsland GA (Princip	31558 pal office street address)
4 Mason Court Kingsland GA (Princip	31558 pal office street address)
4 Mason Court Kingsland GA (Princip	31508
Po Box 1898 Kingsland GA (Princip) (Current)	SIST8 pal office street address) 3(558) mailing address, if different)
Po Box 1898 Kingsland GA (Princip Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent:	SIST8 pal office street address) 3(558) mailing address, if different)
Po Box 1898 Kingsland GA (Princip Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent: Name: David Rodes	pal office street address) 3 (558) mailing address, if different) : (P.O. Box NOT acceptable)
Po Box 1898 Kingsland GA (Princip Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent: Name: David Rodes	pal office street address) 3 (558) mailing address, if different) : (P.O. Box NOT acceptable)
Po Box 1898 Kingsland GA (Princip) Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent: Name: David Roder office Address: 27194 Dump Tele	mailing address, if different) (P.O. Box NOT acceptable) (D) (A) (A) (A) (A) (A) (A) (B) (B
Po Box 1898 Kingsland GA (Princip Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent: Name: David Roder Office Address: 27194 Dump Tel	mailing address, if different) (P.O. Box NOT acceptable) (D) (A) (A) (A) (A) (A) (A) (B) (B
Po Box 1898 Kingsland GA (Princip Po Box 1898 Kingsland GA (Current) Name and street address of Florida registered agent: Name: David Roder Office Address: 27194 Dump Tel	pal office street address) 3 (558) mailing address, if different) : (P.O. Box NOT acceptable)

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.

A. DIRECTORS			
□ Chairman	Name: Robert Durst	□Chairman	Name: Heidi Fried! Diest
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	94 Mason Crt	□Director	94 Mason Cit
President	Kingsland GA 31548	□President	Kingsland GA 3154
		□Vice President	
□Secretary	□Treasurer	Z Secretary	□Treasurer
□Other	Other	Hother CFC)
□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
□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
Important Notice: individuals may be	Use an attachment to report more than six (6). The atta added to the index when liking your Florida Departme	chment will be image ent of State Annual Ro	ed for reporting purposes only. Non-indexed eport form.
12.	Signature of Director of	or Officer	
	ctor signing this document (and who is listed in numberalse information submitted in a document to the Depart	r 11 above) affirms th	
13	(Typed or printed name and capacity of person	on signing application	Hary, CFD

, , , ,

Control Number: 0654697

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

KITE & KEY WIRING, 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 : 26774962 Date Inc/Auth/Filed: 07/13/2006 Jurisdiction : Georgia Print Date : 02/26/2024

Form Number : 211



Bred Raffensperger