7500001762

TO: Qualification/Tax Lien Section Division of Corporations

1 (1000) 5 (5) (5) (10 1 -03/26/35--01030--009 -4444-70,00 - 4444-870,00

W15-11-15

SUBJECT: Saltsman Construction, Inc.
(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", 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:

John W. Saltsman, Jr.	
(Name of Person)	56 38748 38
Saltsman Construction, Inc.	OCT OCT
(Firm/Company)	수 ⁻ 등교
900 6th Avenue South, Suite 301	
(Address)	STA ORA
Naples, Florida 33940	TE CO
(City/State/Zip)	0, 6,
	mt

Should you need to call someone concerning this matter, please call:

John W. Saltsman. Jr. at (941) 434-9714

(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 26, 199F

JOHN W. SALTSMAN JR. % SALTSMAN CONSTRUCTION, INC. 900 6TH AVENUE SOUTH, STE 301 NAPLES, FL 33940

SUBJECT: SALTSMAN CONSTRUCTION, INC.

Ref. Number: W95000019290

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

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must include original signatures.

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 (904) 487-6097.

Michael Mays Document Specialist 95 OCT -2 AHII: 42

Letter Number: 295A00043937

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:

1,	Saltsma (Name of corporabbreviations of person or partne	n Construction, Inc. ration: must include the word "INCOR like import in language as will clearly rahip if not so contained in the name at	PORATED indicate that t present.)	", "COMPAN t it is a corpor	IY","CORPORATIO ation instead of a nat	N" or words ural	or
2	Kentuc	ky	2	65	-0606913		
(State or country under the law of which it is incorporated)			3 ,		-0606913 FEI number, if appli	cable)	
4.	1959		5	Þe	rpetual		
	(Date of	Incorporation)	(Du	ration: Year	orp. will cease to exi	st or "perpetu	al")
6							Z.,
		Upon Qualificationssected business in Florida (SEE SECT			2, AND 817.155, F.S.	35 OCT -2	FII SECRETAR SECRETAR
		h <u>Avenue South, Suite</u>	301, 1	Naples,	Florida 339	=	FOF S
		(Current m	sailing addre	:55)		-	ATIONS
						10	SHO
8.	Constr	uction and Real Estate poration authorized in home state or co	2				_ ທ 🦦
9.	acceptable)	John W. Saltsman, Jr	_	i: (P.O. Be	ox or Mail Drop I	Box <u>NOT</u>	
Off	fice Address: _	900 6th Avenue South	, Suite	∋ 301			
		Naples			33940		
	_	Naples		, Florida , _,	Zin Code)	_	
10.	Registered a	gent's acceptance:		(zip code)		
cor reg all and	poration at the istered agent a statutes relative laccept the ob		cation, I have the erformant stered against significant significan	nereby acce er agree to ce of my di ent.	pt the appointme comply with the puties, and I am fai	nt as Provisions miliar with	of '
11.	delivery of this official having	certificate of existence duly aut s application to the Department custody of corporate records in	nenticated of State, the juris	i, not more by the Seco diction und	than 90 days price retary of State or er the law of which	or to other ch it is	

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

	ECTORS (Street address only- P. O . Box NOT acceptable)		
	man:		
Director:			
Address:			
Director: _			
Address: _		98 SIANE	J. 7
B. OFFIC	CERS (Street address only- P. O. Box NOT acceptable)	OCT OCT	
President: _	John W. Saltsman. Jr.	-5 CA	
Address:	900 6th Avenue South, Suite 301	<u> </u>	0
_	Naples, FL 33940	H: ARA	
	lent:	~ ⊵m	$\mathcal{E}_{\mathcal{F}}$
			G.
Secretary:	John W. Saltsman, Jr.		
Address: _	900 6th Avenue South, Suite 301		
	Naples, FL 33940		
Treasurer:			
Address: _			
NOTE: If r	necessary, you may attach an addendum to the application listing additional or directors.		
13. (Si)	gnature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
14	(Typed or printed name and capacity of person signing application)		



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE DOMESTIC CORPORATION

SECRETARY OF STA

I, BOB BABBAGE, Secretary of State of the Commonwealth of Kentucky, do hereby certify, that according to the records in the office of the Secretary of State of the Commonwealth of Kentucky,	3
is a corporation organized and existing under the laws of the Commonwealth of	
Kentucky, whose date of incorporation is NOVEMBER 30, 1959; and whose period of duration is PERPETUAL	
I further certify, that said corporation has paid all fees due and owing to the of- fice of the Secretary of State of the Commonwealth of Kentucky to date; has delivered to the Secretary of State its most recent annual report, as required by	

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, at Frankfort, Kentucky, this 12TH day of SEPTEMBER , 19 95 .

KRS 271B.16-220 or 273.3671; and has not filed articles of dissolution.

BOB BABBAGE Secretary of State

Commonwealth of Kentucky

SALTSMAN CONSTRUCTION, INC

IN UPDATING OUR VENDOR FILES, WE HAVE FOUND THAT WE DO NOT HAVE YOUR TAX I.D. NUMBER OR SOCIAL SECURITY NUMBER (IF NOT A "C" CORPORATION) ON FILE. THE IRS REQUIRES THAT WE HAVE THIS INFORMATION ON FILE. TO AVOID DELAYS IN THE PROCESSING OF YOUR NEXT PAYMENT, PLEASE FAX US THIS INFORMATION AT 941 434 9717 AS YOUR RECEIVE THIS NOTICE.

THANK YOU IN ADVANCE FOR YOUR COOPERATION.

WE'VE MOVED......EFFECTIVE APRIL 1, 1997 Please update your records accordingly for:

MAILING ADDRESS:

SALTSMAN CONSTRUCTION, INC.

P.O. Box 310

Naples, Florida 34106-0310

PHYSICAL ADDRESS.

65 12th Street South

Naples, Florida 34102-6265

Our phones have remained the same: PHONE: (941) 434-9714

FAX: (941) 434-9717