5000005489 TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section **Division of Corporations**

600001634086 -11713/35--01041--010 *****18.75 ****18.75

SUBJECT: Midwest Wood Renovation, 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:

Steven M. Burton, President	
(Name of Person)	-
Midwest Wood Renovation, Inc.	
(Firm/Company)	- مان مان
7301 Mardyke Lane	# 11/8
(Address)	· 98 🖽
Indiana polis, IN 46226-180; (City/State/Zip)	7章 『
(City/State/Zip)	دك
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Should you need to call someone concerning this matter, please call:	(1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Patricia Burton, Secretary at (317) 546. (Name of Person)	-0164
(Area Code & Daytime Telepho	
0: (311) 54120	1 810

COURIER ADDRESS:

MAILING ADDRESS:

Qualification/Tax Lien Sec. Qualification 1 ax Lien Sec.

Division of Corporations - Great Fine Properties

Division of Corporations

409 E. Gaines St

P. O. Box 6327

Qualification/Tax Lien Section Tallahassee, FL 32314

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:

Name of comporation, must include the world "Niconnas"
(Name of corporation must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. State or country under the law of which it is incorporated) 3. 35 1880062 (FEI number, if applicable)
4. 3.3.73 (Date of Incompration) 5. Per petual
6. (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7
(Current mailing address)
- · · · · · · · · · · · · · · · · · · ·
8. Any cond of legal business (Purpose(s)/of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Macy Coper Jenes
Office Address: 10 Biochtand Dewe
Sunta Resa Bouch mode 32459
10. Registered agent's acceptance: Santa Resa Bouch Florida 3.2459 (Zip Code)
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 a mply with the provisions of all statutes relative to the proper and complete performance of my du ies, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

incorporated.

11. 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

12 Names and addresses of officers and/or directors (Street address ONLY-P O Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman Patricia A Buiton Address 700, Mondy he Lane Lidiana, polis 2 indiana 46236 1807 Vice Charman: Address: _____ Director: Address: Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) Steven M. Burton President: 7301 Maidyke Lane Address: _____ PELS INDIANA 46336-1807 Vice President: ____ Address: ___ Buiton Potricia A. <u> 7</u>301 Marduki Address: ____ Indianapolis I ndiana 46206 1507 Treasurer: _____ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Potencia A. Burton, Secretory

(Typed or printed name and capacity of person signing application)

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

MIDWEST WOOD RENOVATION, INC.

filed Articles of Incorporation on March 03, 1993, and is a corporation only organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

15:45 Hd 5-75, 26

In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-fourth day of October, 1995.

Sue ann Hillay

Deputy

