1900000153



ACCOUNT NO. : 07210000032

REFERENCE: 091027 7163017

AUTHORIZATION .:

COST LIMIT

ORDER DATE: January 7, 1999

ORDER TIME : 10:04 AM

ORDER NO. : 091027-005

CUSTOMER NO: 7163017

000002736170--8

CUSTOMER: Ms. Marcelle E. Reeves Ms. Marcelle E. Reeves 27844 Temple Terrace Drive

Bonita Springs, FL 34135

FOREIGN FILINGS

NAME: C.T. REEVES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Lamm

AL JAN 1 1 1999

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.	C.T. REEVES, INC.
	(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.	
4.	(Date of Incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")
6.	12/24/98 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	
-	27844 Temple Terrace Drive, Bonita Springs, Fl 34135 (Current mailing address)
8	Plastering Residental
	Plastering Residental (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. N	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Corporation Service Company Office Address: 1201 Hays Street
	Office Address: 1201 Hays Street
	Registered agent's acceptance (Zip Code)
10.	Registered agent's acceptance: (Zip Code)
regis all st	ing been named as registered agent and to accept service of process for the above stated oration at the place designated in this application, I hereby accept the appointment as tered agent and agree to act in this capacity. I further agree to comply with the provisions of tatutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent.

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 incorporated.

(Registered agent's signature)

hairman: See a	ttached officers/directors rider	·
ddress:		
		-1, -1
ice Chairman:		
Address:		* * * * * * * * * * * * * * * * * * *
Director:		
Address:	2.7	
Director:		
Address:		
President: See	Street address only- P. O. Box NOT acceptable) attached officers/directors rider	
President: See Address: Vice President:	attached officers/directors rider C	
President: See Address: Vice President: Address:	attached officers/directors rider C	
President: See Address: Vice President: Address: Secretary:	attached officers/directors rider CC S A A CC S A CC S CC S	
President: See Address: See Vice President: Address: Secretary: Address: Secretary: Se	attached officers/directors rider CC S A A CC S C	
President: See Address: See Vice President: Address: Secretary: Address: Secretary: Se	attached officers/directors rider CC S CC A A A CC S A A CC S A A CC S CC S	
President:See Address: Vice President: Address: Secretary: Address: Treasurer:	attached officers/directors rider CC S A A CC S C	

Officer and Director Rider:

President: C.T. Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

V. President: Marcelle Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

Secretary: Marcelle Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

Treasurer: Marcelle Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

Chairman: C.T. Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

V. Chairman: Marcelle Reeves

Address: 27844 Temple DRive, Bonita Springs, Fl, 34135

Director: C.T. Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

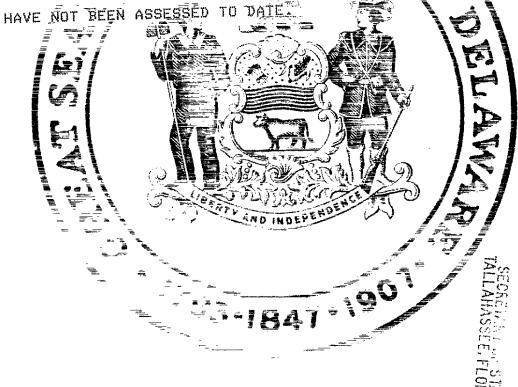
Director: Marcelle Reeves

Address: 27844 Temple Drive, Bonita Springs, Fl, 34135

State of Delaware Office of the Secretary of State

I. EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "C.T. REEVES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF JANUARY,

A.D. 1999 AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES





Edward J. Freel, Secretary of State

AUTHENTICATION:

9508879

DATE:

01-07-99

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