F99 (TRANSMITTIL LETTER) 1034

MINGLEDORFF DESIGN, INC.

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:

000002752940--3 -01/25/99--01040--003 *****78.75 ******78.75

Enclosed is an original a	nd one(1) copy of the articles	of incorporation and a c	theck for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Signature Signat
		ADDITIONAL CO	PY REQUIRED TO STATE OF THE PROPERTY OF THE PR
FROM:	SUSAN C. MINGLEDORFF Name (Pr	inted or typed)	
_	812 NORTH 2ND STREET A	ddress	2/24 2/24
_	MONROE, LA 71201 City,	State & Zip	m
	(318) 325–9869 Daytime To	elephone number	

(Proposed corporate name - must include suffix)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 25, 1999

SUSAN MINGLEDORFF 812 N. 2ND ST MONROE, LA 71201

SUBJECT: MINGLEDORFF DESIGN, INC.

Ref. Number: W99000001790

We have received your document for MINGLEDORFF DESIGN, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

If you are attempting to qualify the above referenced corporation as a foreign corporation (any corporation organized outside Florida), please complete the enclosed foreign application and submit together with an original "certificate of existence" issued by the Louisiana Secretary of State within the last 90 days. You may contact the Louisiana Secretary of State at (504) 925-4704 to request such certificate.

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 (850) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 899A00003298

DIVISION TARY OF STATE

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.

natural person or	partnership if not so containe	ed in the na	me at preser	ıt.)				
LOUISIANA	·		3.	72-08	344604		-	-
(State or country u	nder the law of which it is in	ncorporated	<u>i)</u>	•	(FEI number	r, if applical	ble)	
5-2-77	-	5	PERPET	UAL	-			
(Date	of incorporation)				p. will cease	to exist or '	'perpetual")	
FEBRUARY		-	-					
(Date first tr	ansacted business in Florida	.) (SEE SE	CTIONS 60	7.1501, 60	7.1502 and 8	17.155, F.S	.)	
801 MAPLE	WOOD DRIVE, SUITE 1	6		-		=		
	FL 33458-5544			·		:	99	D)VISE
ANY LEGAL	•	rent mailin	g address)		_		EB 24	CRETARY
	of corporation authorized in address of Florida regis					·	· -:!	F STATE
Name:	SUSAN MINGLEDORF	F						3,
ice Address:	801 MAPLEWOOD DR	IVE, SUI	TE 16		-1	-		-
	JUPITER	•	· ,]	Florida, _	33458 (Zip code)			
his application, I I	nt's acceptance: is registered agent and to ac iereby accept the appointme sions of all statutes relative	ent as regis	tered agent	and agree	to act in this	capacity.	I further ag	ree to

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.

12e 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:						
Address:						
Vice Chairman:						
Address:	,					
Director:						
Address:						
	<u> </u>					
Director:						
Address:						
	.c D					
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	9 50 -					
President: SUSAN MINGLEDORFF	FEB 2					
Address: 801 MAPLEWOOD DRIVE, SHITE 16						
Vice President:	7: 58					
	<u></u>					
Address:						
Secretary: BARBARA A TRIPI						
Address:2706_TDEVAN						
MONROE, LA 71201						
Treasurer:						
Address:						
NOTE, IC.						
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or director						
13. Ausan C. Mendedoff Chairman (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)						
14. JUSAN C. MINGLEDORFF CHAIRMAN						
(Typed or printed name and capacity of person signing application)						



SECRETARY OF STATE

As Secretary of State. of the State of Louisiana, I do hereby Certify that

A LOUISIANA corporation domiciled at MONROE,

Filed charter and qualified to do business in this State on May 02, 1977,

I further_certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

February /4, 1999

LO Secretary of State

77.0

