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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE





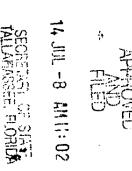
FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2014

DAVID PAVAO 267 OLD CASSIDY RD THOMASVILLE, GA 31792

SUBJECT: PAVAO CABINETS LLC

Ref. Number: W14000041874



We have received your document for PAVAO CABINETS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6051.

Agnes Lunt Regulatory Specialist II

Letter Number: 914A00014612

COVER LETTER

Registration Section

TO:

Divisio	on of Corporations		
SUBJECT:	Pavao Cabinets , L C		
	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Check are submitted to register the above referenced foreign limited liability company to transact busine		
Please return all	correspondence concerning this matter to the following:		
	David Pavao	14 JU	
	Pavao Cabinets	-8 AM	FILED
	267 old cassidy rd.	AM III: 02	
. • '	Thomasville Ga 31792 City/State and Zip Code pdavidsawdust2@aol.com E-mail address: (to be used for future annual report notification)	And the second of the second o	
	rmation concerning this matter, please call:		,
MAIL Divisio Registr P.O. B	Name of Contact Person ING ADDRESS: On of Corporations ration Section ox 6327 cassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	check for the following amount: 5.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \$\Bigcup \\$155.00 Filing Fee & \$\Bigcup \\$160.00 Filing Fee, Certificate of Status \$\Bigcup Certified Copy of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Pavad Cabinets LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. CA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-820476 EC (FEI number, if applicable) EC The second se
4. July Sold Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5
8/1 North Main St HAvama 71 32333
6
267-Old Cossidy Rd Thomasville, DA 31792
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
DAVID Pavao DWNer MOR
267 Old Cassidy Rd
Thomasville JA 31792
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Daid Pans
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Day id Pous
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: ———————————————————————————————————		
If unavailable, the alternate to be used in the state of Florida is:	SECRETATION TALLARIA	<u>.</u>
2. The name and the Florida street address of the registered agent and office are:	-8 AHII: 02	
SIL Morth Main Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	•	
Havanna FL 32333 City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : 13437341 DATE INC/AUTH/FILED: August 02, 2013 JURISDICTION PRINT DATE

: Georgia : July 08, 2014

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PAVAO CABINETS, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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.

Brian P. Kemp

Secretary of State