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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(City) States Lips (City)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Valley View Equestrian	Center, Inc.	
	oration - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation" (Certificate of Existence," and check are submitted transact business in Florida.	on for Authorization to Transact Business in Florida," ed to register the above referenced foreign corporation to	
Please return all correspondence concerning this r	matter to the following:	
Cynthia M. Ferguson, CPA		
(Na	me of Person)	
Cynthia M. Ferguson, CPA		
(Fir	m/Company)	
572 Dunn Rd.		
	(Address)	
Belgrade, ME 04917		
(City/S	State and Zip code)	
For further information concerning this matter, ple	ease call:	
Cynthia M. Ferguson, CPA at (_2	07 , 495-3506	
	Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy Certified Copy Sertified Copy Certified Copy	

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. Valley Vie	ew Equestrian Center Inc.			
	corporation; must include "INCORPORATEI Corp," "Inc," "Co," or "Corp.")	O," "COMPANY," "COR	PORATION,"	
VV Eques	strian Center, Inc.			
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of	of transacting busine	ss in Florida)
_{2.} Pennsylva	ania #2769288	23-2921207		
(State or country	under the law of which it is incorporated)	(FEI nun	nber, if applicable)	
_{4.} 8/6/1997	5	Perpetual		
(Date	of incorporation)	(Duration: Year corp. v	will cease to exist or	"perpetual")
6. Will upon	acceptance of registration			
₇ 170 Rutled	(Date first transacted business (SEE SECTIONS 607,1501 & 607. dgedale Rd., Tyler Hill, PA 1	1502, F.S., to determine pe		
/·	(Principal office ad			
PO Box 1,	Tyler Hill, PA 18469	·	SEC	
	(Current mailing ad	dress)	HAT E	1
8. Livestock	related activities, including t	ransport	ARY O SSEE.	
(Purpose(s	s) of corporation authorized in home state or o	country to be carried out in	state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable		
Name:	Donald Meyer		<u></u>	-
Office Address:	5689 SW RR 232			
	Bell	. Florida 32619	9	
	(City)	(Zip co	ode)	

10. Registered agent's acceptance:

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 comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

^{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.

12. Names and business addresses of officers and/or directors:

DIREC	Donald Meyer	FILED
dress:	P.O. Box 1135	2001 DEC 28 → IO: Ob
	Dall El 20640	SECRETARY OF STATE
ce Chairm	an:	TALLAHASSEE ELODINA
ector:		
ector:		
	·	
OFFICE	ers Donald Meyer	
	O Box 1135	
•	ell, FL 32619	
e Presider	nt:	
retary: _		
dress:		
asurer:	······································	
dress:		
TE: If n	necessary, you may attach an addendum to the application	
	(Signature of Director or Officer listed in num	ber 12 of the application)
Dona	Id Meyer, President (Typed or printed name and capacity of pers	

FILED

COMMONWEALTH OF PENNSYLVANIA

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE

NOVEMBER 29, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

VALLEY VIEW EQUESTRIAN CENTER INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 7053633-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp