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NAME: CARD ENTERPRISES, INC.

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AUTHORIZATION:

ABBIE/PAUL HOD

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Card Enterprises Inc.	0,
	ion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation fo "Certificate of Existence", and check are submitted to to transact business in Florida.	
Please return all correspondence concerning this matter	er to the following:
Wendy Gragg	
(Name o	of Person)
American Incorporators Ltd.	
(Firm/C	ompany)
1220 N. Market St., Suite 606	
(Add	dress)
Wilmington, DE. 19801	
(City/State	and Zip code)
For further information concerning this matter, please	call:
Wendy Gragg at (800	, 421-2661
	Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
·	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, 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 Card Ente	erprises Inc.		~ C 63
words or abbre	oration; must include the word "INCORPORATE viations of like import in language as will clearly or partnership if not so contained in the name at p	indicate that it is a corporation instead of a	THE THE PERSON NAMED IN COLUMN TO PERSON NAM
2. Delaware	3.	N/A	2
	y under the law of which it is incorporated)	(FEI number, if applicable)	500 00
4. May 19,	2003 5.	perpetual	A. 17 18 18 18 18 18 18 18 18 18 18 18 18 18
(Da	te of incorporation)	(Duration: Year corp. will cease to exist or "	perpetual")
6. upon qua	ilification		
(Date first trans	acted business in Florida. If corporation has not (SEE SECTIONS 607.1501,	transacted business in Florida, insert "upon qu , 607.1502 and 817.155, F.S.)	alification.")
_{7.} 1073 SE	1 Way, Deerfield Beach, FL. 33441		
	(Principal office addr	ress)	
1073 SE	1 Way, Deerfield Beach, FL. 33441		
	(Current mailing addr	ress)	
Any lawful	activity, specifically Retail Reseller o	on the Internet	
	(s) of corporation authorized in home state or con		
•	•	•	
9. Name and st	reet address of Florida registered agent:	(P.O. Box or Mail Drop Box NOT accept	able)
Name:	Dean Card		
Office Address:	1073 SE 1 Way		
	Deerfield Beach	, Florida33441	
	(City)	(Zip code)	
Having been na designated in thi further agree to	agent's acceptance: med as registered agent and to accept servi is application, I hereby accept the appointn comply with the provisions of all statutes r familiar with and accept the obligations of	ient as registered agent and agree to act elative to the proper and complete perfor	in this capacity. I
	\sim .		

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:

A. DIRE	
	Dean Card
Address:	1073 SE 1 Way, Deerfield Beach, FL. 33441
-	
	man: Dean Card
Address:	1073 SE 1 Way, Deerfield Beach, FL. 33441
_	
Director:	Dean Card
	1073 SE 1 Way, Deerfield Beach, FL. 33441
Director'	
Address: _	
B. OFFI	CERS
President:	Dean Card
Address:	1073 SE 1 Way, Deerfield Beach, FL. 33441
-	
Vice Presi	dent: Dean Card
	1073 SE 1 Way, Deerfield Beach, FL. 33441
	Door Cord
Secretary:	•
Address:	1073 SE 1 Way, Deerfield Beach, FL. 33441
Treasurer:	Dean Card
Address: _	1073 SE 1 Way, Deerfield Beach, FL. 33441
NOTE: 1	15
NOTE: 1	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
De	ean Card (President)
14.	(Typed or printed pame and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARD ENTERPRISES 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 SE THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JUNE, 2.D.



Floriet Smith Windson Secretary of State

AUTHENTICATION: 2456160

030373138

8300

3659787

DATE: 06-05-03