

F03000003 255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

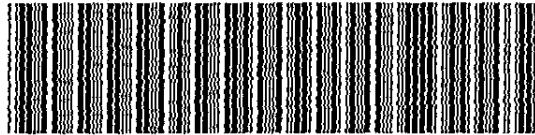
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600020052586

06/16/03--01062--014 **87.50

FILED
03 JUN 16 AM 8:58
STATE
TALLAHASSEE, FLORIDA

PK

CORPDIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

FILING COVER SHEET
ACCT. #FCA-14

CONTACT:

Tricia Tadlock

DATE:

6/30/03

REF. #:

0992.17415

CORP. NAME:

Candrell Enterprises Inc.

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

☐ ARTICLES OF INCORPORATION

☐ ARTICLES OF AMENDMENT

☐ ARTICLES OF DISSOLUTION

☐ ANNUAL REPORT

☐ TRADEMARK/SERVICE MARK

☐ FICTITIOUS NAME

☒ FOREIGN QUALIFICATION

☐ LIMITED PARTNERSHIP

☐ LIMITED LIABILITY

☐ REINSTATEMENT

☐ MERGER

☐ WITHDRAWAL

☐ CERTIFICATE OF CANCELLATION

☐ OTHER:

RECEIVED
03 JUN 30 PM 2:14
STATE
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

STATE FEES PREPAID WITH CHECK# _____ FOR \$ _____

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

☐ CERTIFIED COPY

☐ CERTIFICATE OF GOOD STANDING

☒ PLAIN STAMPED COPY

☐ CERTIFICATE OF STATUS

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 20, 2003

NICOYLE KOHN, CLIENT SERVICES
INCOPI SERVICES, INC.
6075 S. EASTERN AVENUE, SUITE 1
LAS VEGAS, NJ 89119-3146

SUBJECT: CANDRELL ENTERPRISES INC.
Ref. Number: W03000017775

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

We have received your document for CANDRELL ENTERPRISES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

In section 12, please provide street addresses. If the P.O. Box addresses are the only addresses available, please indicate this by writing "N/A" beside the P.O. Box addresses.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 103A00038021

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JUN 26 10 58 AM '03
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Candrell Enterprises
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Antoine C. Russell
(Name of Person)
Candrell Enterprises
(Firm/Company)
P.O. Box 1406
(Address)
Belle Glade, FL 33430
(City/State and Zip code)

For further information concerning this matter, please call:

Antoine C. Russell at (561) 992-5221
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration 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 & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



Dear Sir or Madam:

Enclosed please find an original and two (2) copies that need to be filed with your office. Please forward a file-stamped copy in the enclosed self-addressed envelope.

If you have any questions or concerns regarding the enclosures, please feel free to contact me at (702) 866-2500 or by email at nicoyle@incorpservices.com.

Yours truly,

A handwritten signature in black ink that reads "Nicoyle Kohn". The signature is fluid and cursive, with a long horizontal stroke at the end.

Nicoyle Kohn
Client Services

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03 JUN 16 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Candrell Enterprises 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. Nevada 3. 68-0453096
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 18, 2001 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1075 S. Eastern Avenue, Ste 1 Las Vegas NV 89119
(Principal office address)
P.O. Box 1406; Belle Glade, FL 33430
(Current mailing address)

8. To perform cleaning & janitorial services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

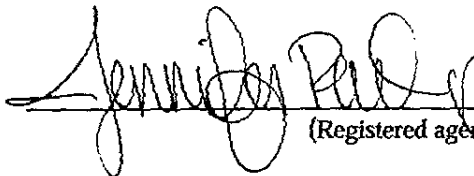
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Incorp Services, Inc.

Office Address: 103 N. Meridian Street
Tallahassee, , Florida 32301
(City) (Zip code)

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.

 , on behalf of Incorp Services, Inc.
(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:

Antoine C. Russell / N/A

A. DIRECTORS

Chairman: Antoine C. Russell

Address: P.O. Box 1406

Belle Glade, FL 33430

Vice Chairman: Same

Address: Same

Director: Antoine J. Russell

Address: P.O. Box 1406

Belle Glade, FL 33430

Director: Annie Russell

Address: P.O. Box 1406

Belle Glade, FL 33430

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CLERK OF DISTRICT COURT
U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

B. OFFICERS

President: Antoine C. Russell

Address: P.O. Box 1406

Belle Glade, FL 33430

Vice President: Same

Address:

Secretary: Same

Address:

Treasurer: Annie Russell

Address: P.O. Box 1406, Belle Glade, FL 33430

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Antoine C. Russell

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Antoine C. Russell

(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CANDRELL ENTERPRISES INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since **April 18, 2001**, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand
and affixed the Great Seal of State, at my office, in
Las Vegas, Nevada, on **April 17, 2003.**



Dean Heller

DEAN HELLER
Secretary of State

By

Angela Suber
Certification Clerk