

F03000005020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

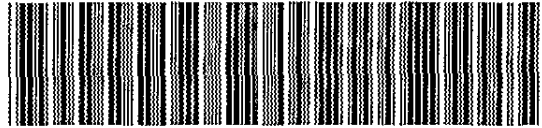
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09/15/03 --01075--028 **87.50

FILED

03 OCT -8 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cart

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kuan Yin Center LTD
(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:

Bonnie L. Spina
(Name of Person)

Kuan Yin Center LTD
(Firm/Company)

614 Baylake Tr.
(Address)

Oldsmar, FL 34677
(City/State and Zip code)

FILED
OCT - 8 AM 8:00
REGISTRATION SECTION
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Bonnie Spina at (813) 855-7837
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 18, 2003

BONNIE L. SPINA
KUAN YIN CENTER, LTD.
614 BAYLAKE TR
OLDSMAR, FL 34677

SUBJECT: KUAN YIN CENTER, LTD.
Ref. Number: W03000026786

We have received your document for KUAN YIN CENTER, LTD. 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 use of LIMITED or LTD. is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

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.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 903A00051791



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 30, 2003

BONNIE L. SPINA
KUAN YIN CENTER, LTD.
614 BAYLAKE TR
OLDSMAR, FL 34677

SUBJECT: KUAN YIN CENTER, LTD.
Ref. Number: W03000026786

We have received your document for KUAN YIN CENTER, LTD. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 103A00053721

**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. Kuan Yin Center LTD, Corp.
(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. Wisconsin 3. 39-1918532
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12-17-1997 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.)

816 Wisconsin St / 647 Main St, Lake Geneva, WI 53147
(Principal office address)
614 Baylake Tr Oldsmar FL 34677
(Current mailing address)

8. moving business / opening new location
(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: Bonnie Spina

Office Address: 127 Forest Lakes Blvd

Oldsmar, Florida 34677
(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.

Bonnie Spina
(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.

FILED
3 OCT -8 AM 8:00

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

A. DIRECTORS

Chairman: Bonnie Spina

Address: 614 Baylake Tr
Oldsmar FL 34677

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Bonnie Spina

Address: 614 Baylake Tr
Oldsmar FL 34677

Vice President: Joan Maierhofer

Address: 1605 Lake Shore Dr
Lake Geneva WI 53147

Secretary: Joan Maierhofer

Address: 1605 Lakeshore Dr Lake Geneva WI 53147

Treasurer: Bonnie Spina

Address: 614 Baylake Tr Oldsmar FL 34677

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

13. Bonnie Spina

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

14. Bonnie Spina - Pres

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

FILED
03 OCT - 8 AM 8:00
TALLAHASSEE, FLORIDA

DOM
180 181 185

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

KUAN YIN CENTER, LTD.

is a domestic corporation organized under the laws of this state and that its date of incorporation is December 11, 1997.

FILED
03 OCT 13 10 00 AM '03
STATE OF WISCONSIN
DEPARTMENT OF FINANCIAL INSTITUTIONS

I further certify that said corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on September 30, 2003.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY:

A handwritten signature in black ink, appearing to read "Cathy Mickelson".