

FO4000005574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status 1

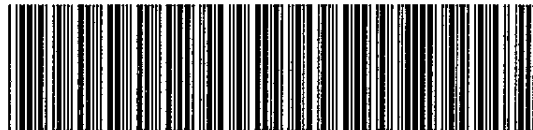
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STATE OF FLORIDA
TALLAHASSEE

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FunZone Party Rental, Inc.
(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:

Famia Green
(Name of Person)
FunZone Party Rental, Inc.
(Firm/Company)
906 Cumberland Circle
(Address)
Minneola, FL 34715
(City/State and Zip code)

For further information concerning this matter, please call:

Famia Green at (352) 536-4267
(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

**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. Funzone Party Rental, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Hawaii 3. 91-217 9317
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/04/02 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 906 Cumberland Circle Minneola FL 34715
(Principal office address)

Same
(Current mailing address)

8. Inflatable moonwalk rentals
(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 NOT acceptable)

Name: Famia Green

Office Address: 906 Cumberland Circle
Minneola, Florida 34715
(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.

Famia Green
(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:

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TALLAHASSEE FLORIDA

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A. DIRECTORS

Chairman: Famia Green

Address: 906 Cumberland Circle
Minneola, FL 34715

Vice Chairman: Robert Green

Address: Same

Director: N/A

Address: _____

Director: N/A

Address: _____

B. OFFICERS

President: Famia Green

Address: 906 Cumberland Circle
Minneola, FL 34715

Vice President: Robert Green

Address: 906 Cumberland Circle
Minneola, FL 34715

Secretary: Robert Green

Address: Same

Treasurer: Famia Green

Address: Same

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

13. Famia Green
(Signature of Director or Officer listed in number 12 of the application)

14. Famia Green
(Typed or printed name and capacity of person signing application)



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department

FUNZONE PARTY RENTAL, INC.

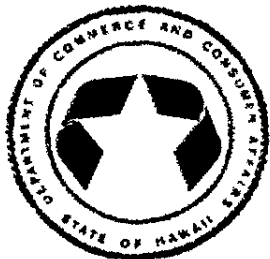
was incorporated under the laws of Hawaii on 11/04/2002; that it is an existing corporation in good standing, and is duly authorized to transact business.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: 09/24/2004

Paul E. Nechtanwald

Director of Commerce and Consumer Affairs



To validate the authenticity of this certificate, please visit the website address listed below and enter the authorization number.

<http://www.ehawaii.gov.org/cogsval>

Auth. No. 202072-D1-20040924185705792