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(Requestor's Name)

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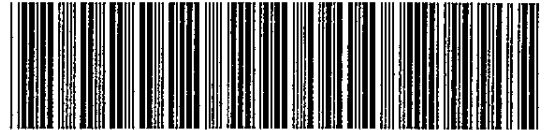
(Business Entity Name)

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TALLAHASSEE, FLORIDA

7p

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPE HOLDINGS INCORPORATED
(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:

DAVID SCHNULLE

(Name of Person)

CAPE HOLDINGS INCORPORATED

(Firm/Company)

PO Box 511794

(Address)

PUNTA GORDA, FL 33951-1794

(City/State and Zip code)

WOS-2911

For further information concerning this matter, please call:

DAVID SCHNULLE

(Name of Person)

at (941) 628-2224

(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

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TALLAHASSEE, FLORIDA

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

January 19, 2005

DAVID SCHNULLE
CAPE HOLDINGS INCORPORATED
PO BOX 511794
PUNTA GORDA, FL 33951-1794

SUBJECT: CAPE HOLDINGS INCORPORATED
Ref. Number: W05000002911

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CAPE HOLDINGS INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

Please list the principal office address in Section 7 on the first line.,

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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: 805A00003535

IN RE: Doc # W05000002911

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPE HOLDINGS, Incorporated
Properties HOLDINGS, L.L.C.
(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:

DAVID SCHULLE
(Name of Person)
CAPE HOLDINGS Incorporated
(Firm/Company)
P.O. Box 511794
(Address)
PUNTA GORDA, FL 33951
(City/State and Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DAVID SCHULLE at (941) 628-2224
(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. CAPE HOLDINGS Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

CAPE HOLDINGS INVESTMENTS, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Nevada 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Dec 9th 2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. HAVE NOT CONDUCTED BUSINESS YET
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 116501 CAPE HORN BL, PUNTA GORDA FL 33955
(Principal office address)

P.O. Box 511794 PUNTA GORDA, FL 33951-
(Current mailing address)

8. All legal activities authorized by the state of Nevada
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 1794
Florida

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

Name: David Schaeble

Office Address: 16501 Cape Horn Bl
Punta Gorda, Florida 33955
(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.

[Signature]
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DAVID Schnulle

Address: 16501 CAPE HORN BV

~~CAPE~~ Punta Gorda, FL 33955

Vice President: DAVID Schnulle

Address: _____

Secretary: DAVID Schnulle

Address: _____

Treasurer: DAVID Schnulle

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

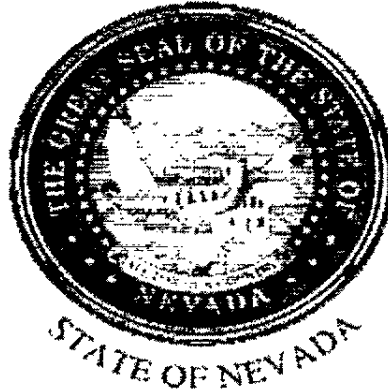
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. x [Signature] President

(Signature of Director or Officer listed in number 12 of the application)

14. DAVID Schnulle, President CAPE HAVENS, Incorporated
(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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts 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, **CAPE HOLDINGS INCORPORATED**, 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 **December 9, 2004**, 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 on February 15, 2005.



Handwritten signature of Dean Heller in cursive script.

DEAN HELLER
Secretary of State

By

Handwritten signature of the Certification Clerk in cursive script.
Certification Clerk

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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