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PICK-UP	☐ WAIT	MAIL.
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DIVINITY OF CORPORATIONS
DIVINITY AHASSEE, FLORIDA

J. BRYAN MAR _ 1 2005

TRANSMITTAL LETTER

	egistration Se ivision of Co						· · · · ·
SUBJEC	T IRENE	RICHARDS ENTE	ERPRISES	S INC.			
~					include suffix)		
Dear Sir o	r Madam:						
"Certificat		tion by Foreign C e," and check are orida.					
Please retu	ırn all corres	pondence concerr	ning this m	atter to the fo	ollowing:		
LORI M. V	VHITLOCK	<u> </u>				<u> </u>	
			(Nan	ne of Person)			
DELAWAR	RE BUSINES	S INCORPORAT	TORS, INC),			
			(Firm	n/Company)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3422 OLD	CAPITOL T	RAIL, SUITE 700)		,		E TE
			(Address)			五年 2
WILMING	TON, DE 19	808					SSE OF THE
			(City/S	tate and Zip	code)		778 3 0
							12: 5 ORATI FLORE
For further	r information	concerning this	matter, ple	ase call:			3 IDA SIONS
LORI WHI	TLOCK		at (302	996	5819		
1)	Name of Pers	on)	(A	rea Code &	Daytime Teleph	one Numbe	er)
Re Di 40 Ta	FREET ADI egistration Se ivision of Co 9 E. Gaines allahassee, FI	ection rporations St. 2 32399			MAILING Al Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	
Enclosed i	is a check for	the following an	iount:				
□ \$70.00	Filing Fee	S78.75 Filir Certificate			Filing Fee & led Copy	Certi	0 Filing Fee, ificate of Status & ified 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. IRENE RICHA	ARDS ENTERPRISES INC.		
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	ON,"
(If name unavai	lable in Florida, enter alternate corporate name ad	onted for the purpose of transact	ing husiness in Florida)
2. DELAWARE	_	20-2317301	ing ousness in 1 ionida)
	under the law of which it is incorporated)	(FEI number, if ap	pplicable)
4. FEBRUARY 1	, 2005	ÉRPETUÁL	
(Date	e of incorporation) (Duration: Year corp. will cease	to exist or "perpetual")
6. UPON AUTH	ORIZATION FROM FLORIDA		西田市
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		HASSES
7. 36181 EAST L	AKE ROAD, #181, PALM HARBOR, FL 3468	5	是 是 三
	(Principal office addres	s)	7: 5
36181 EAST L	AKE ROAD, #181, PALM HARBOR, FL 3468		3000
	(Current mailing addres	s)	7 V
8. MANAG	EMENT, MINA REAL ESTA s) of corporation authorized in home state or coun	TE CONSULTING	G & RELATED Iorida) SERVICES
			iorida) SZICVICOS
9. Name and <u>stre</u>	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	
Name:	Irene Greco	<u> </u>	
Office Address:	36181 East Lake Road, #181		
	Palm Harbor	, Florida 34685	
	(City)	(Zip code)	
10. Registered a	gent's acceptance:		
	sed as registered agent and to accept service	of process for the above state	ed corporation at the place

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.

(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:

A. DIRE	
Chairman:	34000
Address: _	
_	and the second s
Vice Chair	man:
Address: _	<u> </u>
Director: _	rene Greco
Address:	36181 East Lake Road, #181
_	Palm Harbor, FL 34685
Director:	
	ASSE CO
, radi 055	F. F. F. T. S. F. T. F. T. S.
- APEL	
B. OFFIC	To the second se
	Frene Greco
	36181 East Lake Road, #181
-	Palm Harber, FL 34685
Vice Presid	lent:
Address: _	
_	
Secretary:	and the second s
Address: _	
Treasurer:	
Address: _	
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	(Signature of Director or Officer listed in number 12 of the application)
	(Signature of Director or Officer listed in number 12 of the application)
14. <u>7</u>	(Signature of Director or Officer listed in number 12 of the application) Tene Greco President (Typed or printed name and capacity of person signing application)

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IRENE RICHARDS 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 AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IRENE RICHARDS ENTERPRISES INC." WAS INCORPORATED ON THE FIRST DAY OF FEBRUARY, A.D. 2005.



Varriet Smith Hindson

AUTHENTICATION: 3695375

DATE: 02-21-05

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