F06 0000 1496

(Requestor's Name)	-
	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	_
(====	
Certified Copies Certificates of Status	-
Certified Copies Certificates of Status Special Instructions to Filing Officer:]
Special Instructions to Filing Officer:	
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COVERLETTER				
TO: Registration Section Division of Corporations				
SUBJECT: ARDIVOL REALTY II MC (Name of corporation - must include suffix)				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florid "Certificate of Existence," and check are submitted to register the above referenced foreign corpora to transact business in Florida.				
Please return all correspondence concerning this matter to the following:	S			
Moises MARKIZER	沙 等			
(Name of Person) ARDIYOS REALTY I INC. (Firm/Company)				
/(Firm/Company)	ST			
14336 J.W. 148 VL.	黄品			
14336 S.W. 148 Pl. (Address) (City/State and Zip code)				
For further information concerning this matter, please call: MISES MARKITER at (305) 251. 4018 (Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 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 \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$87.50 Filing Fee & \$\Bigcup \\$Certificate of Status \$\Bigcup \\$Certified Copy \$\Bigcup \Bigcup \B	Status &			



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 20, 2005

MOISES MARKIZER 14336 SW 148 PL MIAMI, FL 33196-5032

SUBJECT: ARDIYOS REALTY II INC.

Ref. Number: W05000048040

Upon receipt of your letter and/or check(s) totaling \$140.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 305A00063949

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

*

	CE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO DREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
·· <u> </u>	Corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	Corp.," "Inc.," "Co.," or "Corp.")	
(If name unavai	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	-
	1. 57-1152247	
(State or country	y under the law of which it is incorporated) (FEI number, if applicable)	
4	8-01 5. NA	
	te 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: 142	336 SD 148 Place MixMi, F1 33196 (Principal office address)	
_	SA We	
	(Current mailing address)	
8. To enough	sof corporation authorized in home state or country to be carried out in state of Florida)	~
	eet address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Moises Markiner	77.
Office Address:	14326 SW 148 Plq.	
	MIAN, Florida 33/96	
	(City) (Zip code)	
Having been nan	agent's acceptance: ned as registered agent and to accept service of process for the above stated corporation at the plac is application, I hereby accept the appointment as registered agent and agree to act in this capacity.	e
further agree to c	s application, I hereby accept the appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance of my familiar with and accept the obligations of my position as registered agent.	1
_	Registered agent's signature)	=
	(craping de about a arbuminta)	

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. Name	es and business addresses of officers and/or directors:	
A. DIRE	CTORS	
Chairman:		
Address:		= .
_		<u> </u>
Vice Chair	man:	
	· · · · · · · · · · · · · · · · · · ·	
Director:		
•		
•		
Director		
		
Address: _		
•		
в. Offi	· · · · · · · · · · · · · · · · · · ·	- O
	Maises MAKIZER	•
	14326 SD 148 Nace	- 67 F
	MIAMI, #1. 33196	
Vice Presid	lent:	
Address: _		gm F
_		
Secretary:		<u>. </u>
	67.	
Address:		
NOTE: I	f necessary you may attach an addendum to the application listing additional officers ar	nd/or directors.
13	Who Make	<u> </u>
	(Signature of Director or Officer listed in number 12 of the application)	
14	(Typed or printed name and capacity of person signing application)	
	(-11-a - 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARDIYOS REALTY II, 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-SEVENTH DAY OF FEBRUARY, A.D. 2006.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 4552305

DATE: 02-27-06

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