

FD80000001328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

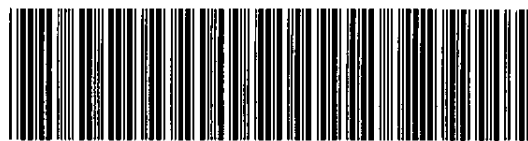
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01/28/08--01019--023 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 25 PM 3:22

MD 3/25

1-28-08
MD



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2008

DAVID ISAGBA
315 WILDFLOWER RD.
DAVENPORT, FL 33837

SUBJECT: HEAVEN'S GATE II CORP
Ref. Number: W08000004602

We have received your document for HEAVEN'S GATE II CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of 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) 245-6921.

Maryanne Dickey
Document Specialist Supervisor
New Filing Section

Letter Number: 208A00005771

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: HEAVENS' GATE II CORP

(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 ISAGBA

(Name of Person)

HEAVEN'S GATE II CORP

(Firm/Company)

315 WILDFLOWER RD

(Address)

DAVENPORT FL 33837

(City/State and Zip code)

For further information concerning this matter, please call:

DAVID ISAGBA

(Name of Person)

at (315) 278-7450

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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.

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1. **HEAVEN'S GATE II CORP**

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

HEAVEN'S GATE II CORP2

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

2. **NEW YORK STATE**

(State or country under the law of which it is incorporated)

3. **26-0791855**

(FEI number, if applicable)

4. **AUGUST 21 2007**

(Date of incorporation)

5. **N/A**

(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. **315 WILDFLOWER RD DAVENPORT FL 33837**

(Principal office address)

P.O. BOX 483 LOUGHMAN FL 33858

(Current mailing address)

8. **MANAGEMENT CONSULTANT**

(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: **DAVID ISAGBA**

Office Address: **315 WILDFLOWER RD**

DAVENPORT

(City)

, Florida **33837**

(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.


(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. DIRECTORS

Chairman: DAVID ISAGBA

Address: 315 WILDFLOWER RD DAVENPORT FL 33837

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DAVID ISAGBA

Address: 315 WILDFLOWER RD

DAVENPORT FL 33837

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If 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)

14. _____

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

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David Isagba, President

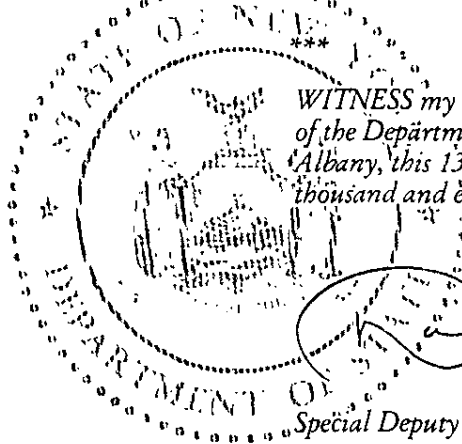
State of New York
Department of State } ss:

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DIVISION OF CORPORATIONS
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I hereby certify, that the Certificate of Incorporation of HEAVEN'S GATE II CORP was filed on 08/21/2007, under the name of HEAVEN'S GATE II CORP, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment HEAVEN'S GATE II CORP, changing its name to HEAVEN'S GATE 2 CORP, was filed 09/17/2007.

A Certificate of Amendment HEAVEN'S GATE 2 CORP, changing its name to HEAVEN'S GATE II CORP, was filed 10/04/2007.



WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 13th day of March two
thousand and eight.

A handwritten signature in black ink, appearing to read "R. L. ...", is written over the seal.

Special Deputy Secretary of State