

F080000004550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

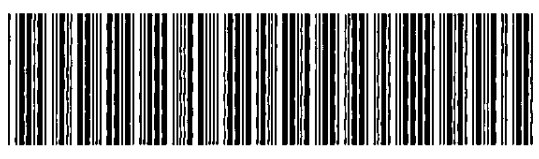
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100136790211

10/20/08--01013--005 **78.75

RECEIVED
08 OCT 20 AM 10:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2008 OCT 20 A 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

80-18-01
2008

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
2009 OCT 20 A 10:39
SECRETARY OF STATE
TALLAHASSEE, FL 32399

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. EUROBUNGY - U.S.A. OPERATION INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☒ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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. EUROBUNGY-U.S.A. OPERATION 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. NEVADA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/11/00 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. November 2008
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 10338 SW 187th Street, Bldg D #5 Miami, fl. 33157
(Principal office address)

10338 SW 187th Street, Bldg D #5, Miami, FL. 33157
(Current mailing address)

8. Amusement rides operator
(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: Cristina Mendoza

Office Address: 10338 SW 187th Street, Bldg D #5, Miami, fl. 33157

Miami, Florida 33157
(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.

Cristina Mendoza
(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.

2008 OCT 20 A 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FILED
2008 OCT 20 A 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: PETER RAIDT

Address: 10338 SW 187 St Bldg D #5
Miami, Fl. 33157

Vice Chairman: _____

Address: _____

Director: CRISTINA MENDOZA

Address: 10338 SW 187 St Bldg D #5
Miami, Fl. 33157

Director: _____

Address: _____

B. OFFICERS

President: PETER RAIDT

Address: 10338 SW 187 St Bldg D #5
Miami, Fl. 33157

Vice President: CRISTINA MENDOZA

Address: 10338 SW 187 St Bldg D #5
Miami, Fl. 33157

Secretary: CRISTINA MENDOZA

Address: 10338 SW 187 St Bldg D #5

Treasurer: Miami, Fl. 33157

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. PETER RAIDT, DIRECTOR CRISTINA MENDOZA, DIRECTOR

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

SECRETARY OF STATE



FILED
2008 OCT 20 A 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, **EUROBUNGY-U.S.A. OPERATION INC.**, 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 April 11, 2000, 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 October 3, 2008.


ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20081003-2452
You may verify this electronic certificate
online at <http://www.nvsos.gov/>