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PICK-UP WAIT MAIL					
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Special Instructions to Filing Officer:					

Office Use Only

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SECRETARY OF STATE DIVISION OF CORPORATION

1/30/09

COVER LETTER

TO: New Filing Section Division of Corpo				
SUBJECT: H	(Name of corporation - m	ust include suffix)	, Inc.	_
Dear Sir or Madam:				
	n by Foreign Corporation for Author and check are submitted to registers.			o
Please return all correspon	ndence concerning this matter to th	e following:		
	Ray Santos (Name of Pers			
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	(Firm/Compan	1562 1 7	<u> </u>	_
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	(City/State and Z	ip code)		_
For further information co	oncerning this matter, please call:			
Cory Hoe	chn ar (321)	615-840	4 .	SIVIG
(Name of Person) (Area Code	& Daytime Telephone	Number) ZW9 JAN 28	CRETZ
STREET/COUR New Filing Section Division of Corporation Building 2661 Executive C Tallahassee, FL	on orations Center Circle	MAILING ADDR New Filing Section Division of Corpor P.O. Box 6327 Tallahassee, FL 3	RESS:	OF STATE ORPORATION
Enclosed is a check for th	e following amount:			
\$70.00 Filing Fee		.75 Filing Fee & rtified Copy	\$87.50 Filing Fee, Certificate of State	ıs &



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2009 JAN 28 AM 10: 29

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 20, 2009

RAY SANTOS 3990 MINTON ROAD WEST MELBOURNE, FL 32904

SUBJECT: HOEHN ENTERPRISES, INC.

Ref. Number: W09000002838

We have received your document for HOEHN ENTERPRISES, INC. 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.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 809A00002042

DEPARTMENT OF STATE
09 JAN 28 PM 3: 38

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

3. 37 1429034

(FEI number, if applicable) (Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) (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) Office Address: , Florida 320v (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.

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:

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

A. DIRECTORS		2009 JAN 28	AM 10: 29
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ldress:			
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ce Chairman:			
ldress:			
rector:			
ddress:			
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ddress:			
esident: PatrickHoehn ddress: 125 Busch har Rincon Ga ice President:	31326		
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cretary:			
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OTE: If necessary, you may attach an addendum to the	Hoe m		ectors.
(Signature of Director or Officer lis		ation)	
4. Yatrick Hoekin (Typed or printed name and capa	city of person signing applicat	(noi)	<u> </u>

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

HOEHN ENTERPRISES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 05/10/2002 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 15th day of January, 2009

Kaun CHandll

Karen C Handel Secretary of State

Certification Number: 3337315-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

SECRETARY OF STATE DIVISION OF CORPORATIONS

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