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SECHETARY OF STATE

APPROVED

Wa-321352

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Card LUTERPRISES Juc. Name of corporation - must include suffix
Name of corporation - must include surfix
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:
THOMAS S. JONES
Coul T From PDD 65
Firm/Company
1396 FOREST ACRES DK.
Address F1 32/62
City/State and Zip code
Sones 139 Combot 9 Mock. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations MAILING ADDRESS: New Filing Section Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70,00 Ailing fee \$578.75 Filing



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2009

THOMAS S. JONES 1396 FOREST ACRES DR THE VILLAGES, FL 32162

SUBJECT: CANDT ENTERPRISES, INC.

Ref. Number: W09000034352

We have received your document for CANDT ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6962.

Letter Number: 709A00025893

Valerie Herring Regulatory Specialist II New Filing Section

D' ' ' CO ' DO DOV 0007 M-H-L- El- ' J- 00014

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUE REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORI		0	
1. Cond EUTERPRISES TOC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
Cond TENTERPRISES TW. Type (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus	siness in Flor	·ida)	
2. INDIANA (State or country under the law of which it is incorporated) 3. 35-2.053972 (FEI number, if applicable)	e)	\.	
4. 8-25-1998 (Date of incorporation) 5. PERFETVAL (Duration: Year corp. will cease to exis	t or "perpetua	al")	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 1396 FOREST ACRES DR.			
(Principal office address) THE VILLAGES, F-L 32/62 (Current mailing address)		60	
REAL ESTATE SERVICES (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	ECRETAL:	AUG -13	晋
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: THOMPS 5. JONES	E. FLORIC	PK 4: 5	Bo
Office Address: 1396 FOREST ACRES TR. THE VILLAGES, Florida 32/62. (City) (Zip code)	¥ ^m	2	
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.

APPHOVEL AND FILED

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

A. DIRECTORS	
Chairman:	
Address:	SECRETARY OF STATE TALLAHASSEE FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
X	5 Res Dr. 1 32/62
Secretary TREAGURES: THOMA	rs. Lours
Address: 13% FOREST AC	
Treasurery	, in the state of
X	
Address:	
NOTE: If necessary, you may attach an addendum to	o the application listing additional officers and/or directors.
	er listed in number 12 of the application)
14. THOMAS S, LONES	
(Typed or printed name and	capacity of person signing application)





STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE ()

09 AUG -13 PM 4: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

To Whom These Presents Come, Greetings:

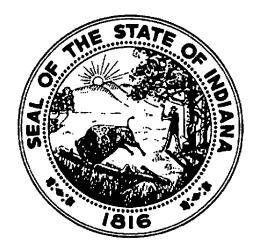
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

CANDT ENTERPRISES, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 25, 1998, and was in existence or authorized to transact business in the State of Indiana on July 16, 2009.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Sixteenth Day of July, 2009.

TODD ROKITA, Secretary of State

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