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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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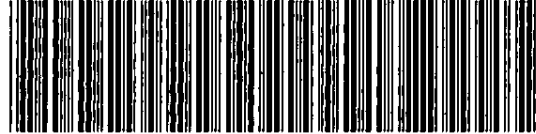
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2010 FEB 26 P 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR -1 2010  
D. A. WHITE

**COVER LETTER**

**FILED**

2010 FEB 26 P 4: 24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** DUTCH MAGIC ENTERPRISES INC.

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," or "Certificate of Good Standing" 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:

GARY BEYER

Name of Person

DUTCH MAGIC ENTERPRISES INC.

Firm/Company

7 MEADOW WAY

Address

KINTNERSVILLE, PA. 18930

City/State and Zip code

DMFC@MSN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY BEYER

at (609) 517-4714

Name of Person

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

FILED

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.

2010 FEB 26 P 4: 24

1. DUTCH MAGIC ENTERPRISES INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "LTD.," "CO.," "CORP.," "INC.," "CO.," or "CORP.")

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

2. PENNSYLVANIA

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

3. 23-2684686

(FEI number, if applicable)

4. 02/21/92

(Date of incorporation)

5. PERPETUAL

(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. 7 MEADOW WAY KINTNERSVILLE, PA. 18930

(Principal office address)

7 MEADOW WAY KINTNERSVILLE, PA 18930

(Current mailing address)

8. MOBILE FOOD CONCESSIONAIRE

(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: GARY BEYER

Office Address: 16664 MURCOTT BLVD

LOXAHATCHEE

(City)

, Florida 33470

(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 addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: GARY BEYER

Address: 7 MEADOW WAY

KINTNERSVILLE, PA. 18930

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 Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. GARY BEYER-PRESIDENT

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

**FILED**

2010 FEB 26 P 4: 24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

COMMONWEALTH OF PENNSYLVANIA

2010 FEB 26 P 4: 24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE

FEBRUARY 22, 2010

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DUTCH MAGIC ENTERPRISES INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and  
remains a subsisting corporation so far as the records of this office show, as of  
the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's Office to  
be affixed, the day and year above  
written.

*Richard A. Centes*  
Secretary of the Commonwealth