

F11000002837

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

W11-32279

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11 JUN 24 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: T & R, 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:

TRACY Khong
Name of Person

12986 Mandarin Road
Firm/Company
Address

JAX FL 32223
City/State and Zip code

t khona @ gmail . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TRACY KHONA at (904) 886 0381
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2011

TRACY KHONA
12986 MANDARIN ROAD
JACKSONVILLE, FL 32223

SUBJECT: T & R, INC.
Ref. Number: W11000032279

We have received your document for T & R, 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 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.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 211A00014505

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

White Pomegranate, Inc.
(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. 3-10-2011 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. ~~2010~~ 7-01-2011
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4131 UNIV. BLVD SO. A-4 JAX FL
(Principal office address) 32216
P.O. Box 550 86 JAX FL 32216
(Current mailing address)

8. MEDICAL PRACTICE
(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: RICK KHONA

Office Address: 4131 UNIV. BLVD SO. A-4
JAX, Florida 32216
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Rick Khona
(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: TRACY SINHA-KHONA

Address: 4131 UNIV. BLVD S. A-4 JAX
32216

Vice Chairman: TRACY KHONA

Address: PO Box 55086 JAX FL 32216

Director: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

Director: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

B. OFFICERS

President: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

Vice President: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

Secretary: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

Treasurer: TRACY KHONA

Address: P.O BOX 55086 JAX FL 32216

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
Signature of Director or Officer

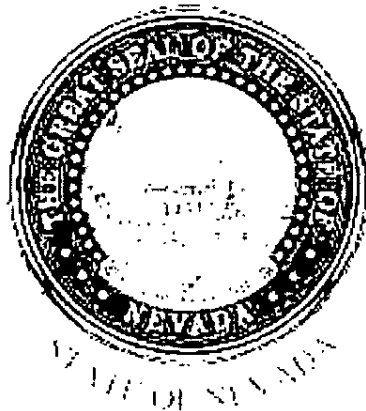
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. TRACY KHONA PRESIDENT

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

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11 JUN 24 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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, **T & R, 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 March 10, 2011, 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 May 9, 2011.

ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20110509-1492
You may verify this electronic certificate
online at <http://www.nvsos.gov/>