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PICK-UP WAIT MA	IL
(Business Entity Name)	
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SECRETARY OF STATE OR CORPORATIONS



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2012

EDWARD TANZA 52 TUSCAN WAY SUITE 202-148 SAINT AUGUSTINE, FL 32092

SUBJECT: IHN ENTERPRISES INC

Ref. Number: W12000024485

We have received your document for IHN 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):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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) 245-6052.

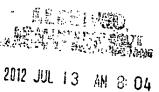
Pamela Smith Regulatory Specialist II

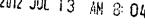
Letter Number: 812A00013342

See Enclosed
labeled #



FLORIDA DEPARTMENT OF STATE Division of Corporations





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May 18, 2012

EDWARD TANZA IHN ENTERPRISES 52 TUSCAN WAY SUITE 202-148 SAINT AUGUSTINE, FL 32092

SUBJECT: IHN ENTERPRISES INC.

Ref. Number: W12000027787

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 012A00014721

See enclosed

Recovery JI 25263618512

COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJ	ECT: IHN E	Enterprises			
			orpora	tion - must include suffix	
Dear S	ir or Madam:				
"Certif	ficate of Existence		Good S	for Authorization to Transa Standing" and check are sub Siness in Florida.	
Please	return all corresp	ondence concerning t	his ma	tter to the following:	
Edw	ard Tanz	<u>a</u>			
-			Name	of Person	
<u>IHN</u>	Enterpris	ses			
		j	Firm/C	Company	
52	Tuscan W	ay Suite 202	2-14	48	
			A	ddress	
Sain	t Augustine,	FI 32092			
		Ci	ty/Sta	te and Zip code	
ihn.e	nterprises@	gmail.com			
	<u>'</u>		be us	ed for future annual report	notification)
For fur	ther information	concerning this matter	r, pleas	se call:	
Edwa	ard Tanza	nt (904	√ 290-1846	
	Name of Person			ea Code & Daytime Teleph	one Number
	STREET/COU New Filing Sect Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		MAILING A New Filing So Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Enclose	ed is a check for	the following amount:			
□\$7	70.00 Filing Fec	\$78.75 Filing Fed Certificate of Sta	e & atus	\$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

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.

(State or country under the law of which it is incorporated) 12-28-2011 (Date of incorporation) 5. perpetual (Duration: Year corp. will cease to exist or "perpetual") 6. May 1st 2012 or whenever this gets processed (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 701 Market St Suite 111-110F, Saint Augustine, Fl 32092 (Principal office address) 52 Tuscan Way Suite 202-148 Saint Augustine, Fl 32092 (Current mailing address) Virtual Administrative Office (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	New York (State or country under the law of which it is incorporated) 12-28-2011 (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) 7. 701 Market St Suite 111-110F, Saint Augustine, FI 32092 (Principal office address) 52 Tuscan Way Suite 202-148 Saint Augustine, FI 32092	lorida)
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	Saint Augustine (City), Florida 32092 (Zip code) D. Registered agent's acceptance: Varing been named as registered agent and to accept service of process for the above stated corporation	
signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity	Saint Augustine , Florida 32092 (City) (Zip code) No. Registered agent's acceptance: Eaving been named as registered agent and to accept service of process for the above stated corporation assignated in this application, I hereby accept the appointment as registered agent and agree to act in this	s capacity
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity Orther agree to comply with the provisions of all statutes relative to the proper and complete performance of my di	Saint Augustine (City) (Zip code) Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation esignated in this application, I hereby accept the appointment as registered agent and agree to act in this arther agree to comply with the provisions of all statutes relative to the proper and complete performance.	s capacity
laving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity wither agree to comply with the provisions of all statutes relative to the proper and complete performance of my durther agree to complete performance of my durther agree to complete performance of my position as registered agent.	Saint Augustine , Florida 32092 (City) (Zip code) 0. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation esignated in this application, I hereby accept the appointment as registered agent and agree to act in this	s capacity
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my di	Saint Augustine (City), Florida 32092 (Zip code) 0. Registered agent's acceptance: Idaving been named as registered agent and to accept service of process for the above stated corporation esignated in this application, I hereby accept the appointment as registered agent and agree to act in this urther agree to comply with the provisions of all statutes relative to the proper and complete performance.	s capacity

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: Edward Tanza Address: 52 Tuscan Way Suite 202-148 Saint Augustine, FI 32092 Vice Chairman: same **B. OFFICERS** President: Edward Tanza Address: 52 Tuscan Way Suite 202-148 Saint Augustine, FI 32092 Vice President: same Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Edward Torre Pros. Jest (Typed or printed name and capacity of person signing application)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

State of New York Department of State } ss:

12 JUL 13 PM 2: 15

I hereby certify, that the Certificate of Incorporation of IHN ENTERPRISES INC. was filed on 12/28/2011, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 03rd day of July two thousand and twelve.

First Deputy Secretary of State