Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

0409.175517

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Address		
	Address	Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION PANDEY HOTEL CORPORATION

Certificate of Status	O STATES OF THE PROPERTY OF TH
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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#### **COVER LETTER**

TO:	New Filing St Division of Co			
STIR.	ECT: Pa	indey Hotel Corporatio	n	•
		Name of corpo	ration - must include suffix	
Dear :	Sir or Madam:			
"Certi	ficate of Exister		on for Authorization to Trans d Standing" and check are st pusiness in Florida.	
Please	return all corre	spondence concerning this	matter to the following:	•
		_Pra	kash Pandey	<u> </u>
		Na	me of Person	
		Firm	n/Company	<u> </u>
Lev	el 7, 87 Que	ens Street		
			Address	
Au	ckland, New 2	Zealand		
		City/	State and Zip code	
prai	(ashp@cpgro			
For fi	urther informatio	E-mail address; (10 be on concerning this matter, p	used for future annual report lease call;	T DOMICEDON)
Ro	sa Wong	at (3	05 <sub>3</sub> 374-5600 Ext.	. 45528
	Name of Per		Area Code & Daytime Tele	phone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		
Encle	osed is a check f	or the following amount:		
	\$70,00 Filing F	S78.75 Filing Fee & Certificate of Statu		\$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.

(Brief name of corporation; must include "INCORPORA" inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	ated,"	"COMPANY," "CORPORATION,"		
(If name unavailable in Plorida, enter alternate corporate	name i	adopted for the purpose of transacting business in Florida)		
Delaware	3.	39-2079100		
(State or country under the law of which it is incorporated	d)	(FHI number, if applicable)		
February 23, 2012	5.	Perpetual		
(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
		Piorida, if prior to registration) 02, F.S., to determine penalty liability)		
Level 7, 87 Queens Street, Auckland, New	/ Zeal	and		σ.
(Principal offi			75	ZSS.
Level 7, 87 Queens Street, Auckland, New	v Z <u>ea</u>	land	NON	S C
(Current maili	च8 ¥पृत्र	reac)	1-6	A PETA
Any lawful business permitted by the laws				EDRPORATIONS
(Purpose(s) of corporation authorized in home state	te er co	untry to be carried out in state of Florids)	<u> </u>	Sugar
Name and street address of Florida registered agent	t: (P.C	). Box NOT acceptable)	AM 10: 35	ÀTIO
Name: NRAI Services, Inc.		<del></del>	55	***
ffice Address: 515 East Park Avenue				
Tallahassee		, Florida 32301		
(City)		(Zip code)	•	
esignated in this application, I hereby accept the ap	points dutes r	ce of process for the above stated corporation at the prent as registered agent and agree to uct in this capa elative to the proper and complete performance of mation as registered agent.	chy. I	<b>3</b> ,
c 101.7 11.1	7	Michele Holden,		
I I I I I I I A TOTAL		Asst. Secretary		

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. Name	es and business addresses of officers and/or directors:		
A. DIRE	ECTORS		
Chairman			
Vice Chai	man:		
_	,	;	
Director:	Prakash Pandey		
Address:	Level 7, 87 Queens Street		
	Auckland, New Zealand	,	
Director:		-	•
B. OFF	ICERS		
President;	Prakesh Pandey		
Address:	Level 7, 87 Queens Street	76	DIVISION
,	Auckland, New Zealand	NO	CRE
Vice Pres	ident:	<del>.</del>	77
			023
		<u>곡</u> 호	กลา
Secretary	Prakash Pandey	ယ္	
Address:	Level 7, 87 Queens Street, Auckland, New Zealand	·	3.0
Treasurer.	Prakash Pandey	<del></del>	
Address:	Level 7, 87 Queens Street, Auckland, New Zealand		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
13			
The offic	Signature of Director or Officer per or director signing this document (and who is listed in number 12 above) affirms that the facts stated here		
ero tura s	and that he or she is aware that false information submitted in a document to the Department of State constitutes follows as provided for in a.817.155, F.S.	ein utes a	
	kash Pandey, President		
, <u>- · · -</u>	(Typed or printed name and capacity of person signing application)		

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PANDEY HOTEL CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF NOVEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PANDEY HOTEL CORPORATION" WAS INCORPORATED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATEMS
OIVISION OF AM 10: 35

5113800 8300 121198985



AUTHENTICATION: 9965500

DATE: 11-06-12 121198985

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