

Oct. 29. 2014

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Division of Corporations

H14000253044 3

Florida Department of State
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FOREIGN PROFIT/NONPROFIT CORPORATION

Fun Line Incorporated

Certificate of Status	0
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Electronic Filing Menu

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Help

H14000253044 3

H14000253044 3

**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. **Fun Line Incorporated**

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

Helium Service and Balloon Incorporated

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

2. **California**

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

3. **33-0748567**

(FEI number, if applicable)

4. **March 17, 1997**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **N/A**

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **11110 Shady Oak St., Orlando, FL 32832-6047**

(Principal office address)

11110 Shady Oak St., Orlando, FL 32832-6047

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Paracorp Incorporated**

Office Address: **155 Office Plaza Dr., 1st Floor**

Tallahassee

(City)

, Florida **32301**

(Zip code)

9. 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.

See attached

(Registered agent's signature)

10. 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.

H14000253044 3

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

H14000253044 3

A. DIRECTORS

Chairman: Hassan Kian Nasr

Address: 2165 Manchester Ave.
Anaheim, CA 92802

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Hassan Kian Nasr

Address: 2165 Manchester Ave.
Anaheim, CA 92802

Vice President: _____

Address: _____

Secretary: Hassan Kian Nasr

Address: 2165 Manchester Ave., Anaheim, CA 92802

Treasurer: Hassan Kian Nasr

Address: 2165 Manchester Ave., Anaheim, CA 92802

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

12. _____

Hassan Kian Nasr
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.

13. Hassan Kian Nasr, President

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

H14000253044 3

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 10/27/2014

ENTITY NAME: FUN LINE INCORPORATED

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.



Sharon Cooke, Assistant Secretary
Paracorp Incorporated

H14000253044 3

H14000253044 3

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

FUN LINE INCORPORATED

FILE NUMBER: C2004486
FORMATION DATE: 03/17/1997
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of October 28, 2014.

Debra Bowen

DEBRA BOWEN
Secretary of State