F15000001416

(Red	questor's Name)				
(Add	dress)				
(Add	dress)				
(City	//State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	siness Entity Nar	me)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					



01/29/15--01014--019 **87.50

Office Use Only

Office Use Only

APR 0 3 2015

T. SCOTT





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2015

JACKIE RICO GREENSPOON MARDER, P.A. 250 SOUTH AUSTRALIAN AVENUE, SUITE # 700 WEST PALM BEACH, FL 33401

SUBJECT: THE DUTTA CORPORATION

Ref. Number: W15000008603

We have received your document for THE DUTTA CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(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.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 815A00003965

COVER LETTER

TO:	ΓO: New Filing Section Division of Corporations						
CHDI	The I	Dutta Cor	ooration	า			
SUDJ	SUBJECT: Name of corporation - must include suffix						
Dear S	Sir or Madam:						
"Certi	• •	e," or "Certifica	te of Good S	Standing" a	nd check are sul	nct Business in Florida," bmitted to register the	
Please	return all corresp	pondence concer	ning this ma	tter to the f	following:		
Jac	kie Rico						
			Name	of Person			
Gre	enspoon l	Marder, P	.A.				
		•	Firm/C	Company			
250	South Au	ıstralian A	venue,	Suite #	‡ 700		
			Ac	idress			
We	st Palm Be	each, FL 3	33401				
			City/Stat	e and Zip o	ode		
jack	ie.rico@gn						
		E-mail addre	ss: (to be us	ed for futur	e annual report	notification)	
For fu	rther information	concerning this	matter, plea	se call:			
Jackie Rico 561			、838-4504				
Jac	Name of Person		_ at (561	Area Code & Daytime Telephone Number			
	Name of Perso	,111	Air	ea Code &	Daytime Teleph	one Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ection orporations 7			
Enclos	sed is a check for	the following an	nount:				
5 \$70	0.00 Filing Fee	☐ \$78.75 Fili Certificate			Filing Fee & ied Copy	■ \$87.50 Filing Fee, Certificate of Status &	

GreenspoonMarderLAW

888-491-1120 www.gmlaw.com

From the desk of:
Donald P. Dufresne, Esq.
CityPlace Tower, 15th Floor
525 Okeechobee Blvd.
West Palm Beach, Florida 3340

Phone: 561.227.2370 Fax: 561.227.0071

Email: Donald.Dufresne@gmlaw.com

VIA FEDEX

March 31, 2015

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Attention: Tyrone Scott
Regulatory Specialist II

15 APR - 1 PM 12: 08

Re: The Dutta Corporation / Application by Foreign Corporation for Authorization to Transact Business in Florida

Dear Mr. Scott,

Please find enclosed the following documents:

- a) The original Cover Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida with the alternate name Dutta Horse Transportation, Inc.;
- b) Certificate of Good Standing from the State of New York dated March 27, 2015;
- c) Prior Certificate of Good Standing from the State of New York for your reference;
- d) Copy of original fee check.

Please register the above referenced corporation to do business in the State of Florida

Should you have any questions, please do not hesitate to contact me at (561) 329-5922. Thank you for your help.

Very truly yours,

GREENSPOON MARDER, P.A.

Donald P. Dufresne, Esd.

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.

The Dutt	a Corporation		
(Enter name of c	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION,"	
Dur	TTA HORSE TRANSP	ONTATION, INC.	
(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in l	Florida)
2. New York	k ₃ 1	13-380-0974	
	y under the law of which it is incorporated)	(FEI number, if applicable)	
_{4.} 12/27/19	94 _{5.} F	Perpetual	
•	•	Duration: Year corp. will cease to exist or "perp	etual")
_{6.} January	1st, <u>2</u> 015		
	(Date first transacted business in F		— J
17 Saint ((SEE SECTIONS 607.1501 & 607.1502	• • •	VODTU CODO
7. 11 Saint C	Charles Street, Thornwood,	00 117,00,1	VURIH SWEET
11861 Ma	Principal office addres idstone Dr., Wellington, FL 33	•	NY 1056
	(Current mailing addres	s)	5
			APR ST
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Tim J. Dutta	<u> </u>	
Office Address:	11861 Maidstone Dr.		9:17
	Wellington	, Florida 33414	5
	(City)	(Zip code)	
9. Registered age	ent's accentance		
Having been nam	ed as registered agent and to accept s ff yice	of process for the above stated corporation	n at the place
designated in this	application, I hereby accept the appdintme	nt as registered agent and agree to act in ti	his capacity. I
jurther agree to co duties, and I am f	omply with the provisions of all statute relations of all statutes relations of a	wive to the proper and complete performancy position as registered agent.	nce of my
	(Registered agent's sign	ature)	

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Tim J. Dutta 47 Saint Charles Street, Thornwood, NY 10594 Vice Chairman: __ Address: _____ Director: Address: ___ Director: **B. OFFICERS** President: Tim J. Dutta 17 Saint Charles Street, Thornwood, NY 10594 Vice President: __ Address: ___ Secretary: ___ Address: ___ Treasurer: Address: tion figting additional officers and/or directors. NOTE: If necessary, you may attach an addendum to the applic 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 \$817.155, F.S. Tim J. Dutta

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of THE DUTTA CORPORATION was filed on 12/27/1994, 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.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of March two thousand and fifteen.

Counting Sicilian

Executive Deputy Secretary of State

0.1502200102

STATE OF NEW YORK DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 6, 2014.

Anthony Giardina

Executive Deputy Secretary of State

Attay Sierdina