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(Requestor's Name)

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(City/State/Zip/Phone #)

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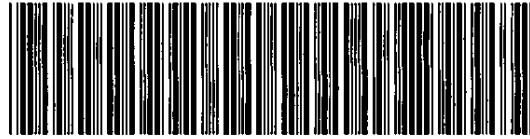
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
15 MAR 11 PM 3:59

MAR 14 2016  
S. YOUNG

**ABA P.A.**

**825 Brickell Bay Drive. Suite #851 Miami, FL, 33131.**

**Local 305 374-3131 305-374-3162 fax 305 374-0497**

**Tel. Toll Free 800-979-5106 Toll Free Fax 1-800-979-0497**


**aba@abapa.info, aba@abapa.net, aba@abapa.org, aba@abapa.pro**

**Division of Corporations Clifton Building  
Registration Section 2661 Executive Ctr. Circle  
Tallahassee Florida 32301**

**March 10, 2016**

**Ref: Corporation P01000092204 Filed 09/20/2001 HONDCUB  
ENTERPRISES, CORP. FEI/EIN 65-1139671**

**Dear sirs find within the attached P.O.A to have the above named  
corporation register as a foreign corporation. We hope this change will  
help protect "HONDCUB ENTERPRISES, CORP." from unscrupulous  
individuals. In Florida, anyone can tamper and make changes to  
someone else corporation without getting arrested or prosecuted.**



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**M. Lora**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAR 11 PM 3:59

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HONDCUB ENTERPRISES, CORP.

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:

Manuel Lora

Name of Person

Hondcub Enterprises, Corp.

Firm/Company

16192 Coastal Highway

Address

Lewes, DE 19958

City/State and Zip code

help@hondcub.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Manuel Lora

Name of Person

at (800

Area Code

) 632-9162 options 1,4,1

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|--|---|---|

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STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
15 MAR 11 PM 3:59

**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. HONDCUB ENTERPRISES, CORP.

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

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

2. Delaware 3. 65-1139671  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 16192 Coastal Highway, Lewes, DE 19958  
(Principal office address)

16192 Coastal Highway, Lewes, DE 19958  
(Current mailing address, if different)

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

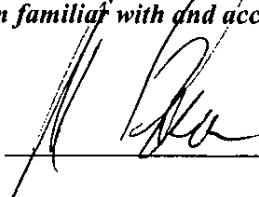
Name: Manuel Lora

Office Address: 825 Brickell Bay Dr. Suite 851

Miami, Florida 33131  
(City) (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.*



(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.

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
15 MAR 11 PM 3:59

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Marketing Director Alex Zaldivar

Address: 825 Brickell Bay Dr. Suite 851

Miami, FL 33131

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Aycher Carbonell

Address: 825 Brickell Bay Dr. Suite 851, Miami, FL 33131

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. Aycher Carbonell

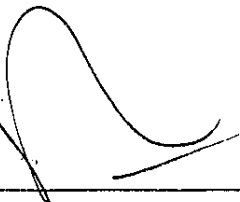
(Typed or printed name and capacity of person signing application)

## Irrevocable Power of Attorney

I, Angel Parra as president of "HONDCUB ENTERPRISES" appoint Manuel Lora of ABA P.A. INT'L located at 825 Brickell Bay Drive, Suite 851, Miami, FL 33131 as my attorney-in-fact ("Agent") to exercise the powers and discretions described below or other issues associated with CIVIL DEMAND 1529498CA as reported on my credit report on Feb 5, 2016 9:39 PM, " same as the "IRS TAX" issues on 1090 from "FIRST DATA"

My Agent Manuel Lora and ABA P.A. INT'L or its designated agents shall have full power and authority to act on my behalf. This power and authority authorizes my Agent to manage and conduct all my affairs and to exercise all my legal rights and powers. My Agent's powers shall include: Asking, conferring, obtain, requesting, any and all documents or likewise from any, creditors, collection agents, collectors, debtors, government agencies, law enforcement agencies, leasing companies, Federal, Local, state or otherwise not excluding "IRS" Florida Department of revenue et all.

This power shall include any and all issues pertinent or relevant to demands, meetings, mitigations, settlements on any debt business or personal. All parties are and shall be instructed to contact ABA. P.A. INTL, 1-800-970-5106 and or ADAW, HONDCUB ENTERPRISES at 1-800-632-9162



Angel Parra

02/08/2016

Date

Witness

Winston A. Bervis

Notary Public Name

2/08/16

Day



WINSTON A. BERVIS  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# EE876241  
Expires 2/19/2017

5:10 PM  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "HONDCUB ENTERPRISES, CORP." 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 JANUARY, A.D. 2016.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAR 11 PM 3:59



  
Jeffrey W. Bullock, Secretary of State

5907266 8300

SR# 20160067106

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201629033

Date: 01-06-16

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
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(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

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

3. 65-1139671

(FEI number, if applicable)

4. \_\_\_\_\_

(Date of incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetual)

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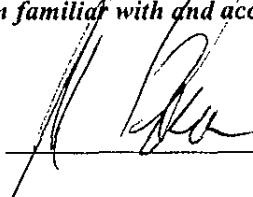
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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
11 MAR 11 PM 3:59



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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Marketing Director Alex Zaldivar

Address: 825 Brickell Bay Dr. Suite 851

Miami, FL 33131

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
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**B. OFFICERS**

President: Avcher Carbonell

Address: 825 Brickell Bay Dr. Suite 851, Miami, FL 33131

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Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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Address: \_\_\_\_\_

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

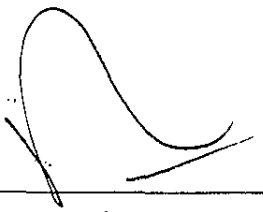
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAR 11 PM 3:57

## Irrevocable Power of Attorney

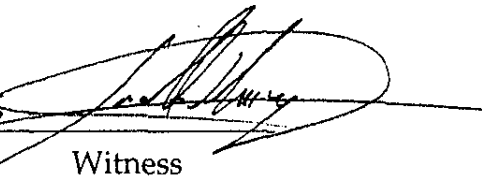
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Angel Parra

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Date

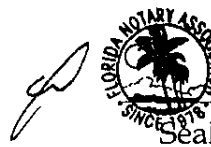
  
Witness

Winston A. Bervis

Notary Public Name

2/08/16

Day



WINSTON A. BERVIS  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# EE876241  
Expires 2/19/2017

RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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# Delaware

The First State

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Jeffrey W. Bullock, Secretary of State

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