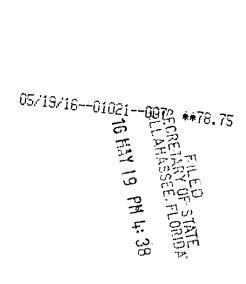
FLODBOUN

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Eiling Officer	
- (-		
		:





300285891973



MAY 2 0 2016 S. YOUNG

COVER LETTER

TO:	Registration Section Division of Corpor				•	
CUDI	DOD ENTER	PRISE, CORP				
SUBJ	ECT:	Name of c	orporation -	must include suffix		
Dear S	Sir or Madam:					
"Certi		or "Certificate of	Good Stand	authorization to Transac ing" and check are sub in Florida.		
Please	return all correspond	lence concerning	his matter t	o the following:		
JESSI	CA KOHANBASH					- F
	 		Name of Po	Preon		<u> </u>
DQD ENTERPRISE, CORP						16 HEY 19
			D: /C			<u> </u>
9740 E	SARKER CYPRESS RI		Firm/Comp	any		PM 4: 38
		·	A 1 1		·	
CYPR	ESS, TX 77433		Addres	S		Ö
		Ci	ty/State and	l Zip code		
RXON	EPHARMACYTX@G	MAIL.COM		•		
	F	E-mail address: (to	be used fo	r future annual report n	otification)	
For fur	ther information con-	cerning this matte	r, please ca	II:		
JESSIC	CA KOHANBASH	at (281	656-2000	,	
	Name of Person		Area Code	Daytime Teleph	none Number	
	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n utions uter Circle 301		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	
Enclos	ed is a check for the	following amount				
□ \$70	0.00 Filing Fee	\$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing I Certificate of S	Status &

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.

(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida
TEXAS	3.	46-4499376
	y under the law of which it is incorporated) 5.	(FEI number, if applicable) PERPERTUAL
(Date	(Date of incorporation) (Date of duration, if other than per	
5		
9740 BARKER (CYPRESS RD, STE 107, CYPRESS, TX 7743	502, F.S., to determine penalty liability)
	(Current mailin	ng address, if different)
. Name and stree	et address of Florida registered agent: (P.C). Box NOT acceptable)
Name:	BUSINESS FILING INCORPORATED	
Office Address:	1200 S PINE ISLAND RD	
	PLANTATION	33324 , Florida
	(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.

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: N/A		
Address:		
·		
Vice Chairman:		
Address:		
•		
Director:	-	
Address:		
Director:		
		7
Address:	o :	<u> </u>
B. OFFICERS		ARY RES
President: JESSICA KOHANBASH	P	ri Se
1464 BEVERWIL DR. LOS ANGELES, CA 90035	<u></u>	LOR!
Address:		設置
Vice President:	·	
Address:		
MAHVASH KOHANBASH		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application lis	sting additional officers and/or directors	
	and thomas officers and of the cors.	
12. Signature of Director or Offi	cer	_ · · · · · · · · · · · · · · · · · · ·
The officer or director signing this document (and who is listed in numb	er 11 above) affirms that the facts stated he	
are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, F.S.	document to the Department of State const	ntutes
JESSICA KOHANBASH/PRESIDENT		

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for DQD ENTERPRISE, CORP. (file number 801911420), a Domestic For-Profit Corporation, was filed in this office on January 09, 2014.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 28, 2016.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 662838240003