

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.

(((H17000018844 3)))



H170000188443ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORPORATING SERVICES FL

Account Number: I20050000052 Phone : (850)656-7956

Fax Number : (850)656-7953

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

Email Address: radiva incserv. com

FOREIGN PROFIT/NONPROFIT CORPORATION ONDORE INC.

Certificate of Status 0 0 Certified Copy 03 Page Count \$70.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

Help

() : () :

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. ONDORE INC. ١. (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) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 5201 W KENNEDY BLVD, TAMPA, FL 33609 (Principal office address) luege@ondore.com (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) INCORPORATING SERVICES, LTD. Name: 1540 GLENWAY DRIVE Office Address: TALLAHASSEE (City)

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.

Ziperdaua Hau Amstant fecretary
(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.

11. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:FERNANDO LUEGE MATEOS		•	
Address: 5201 W KENNEDY BLVD, TAMPA, FL 33609		<u> </u>	
74 . 01 .		·	
Vice Chairman:			
Address:	<u>-</u>		
Director:			
Address:	<u> </u>	 -	
Director;			
Address:			
B. OFFICERS			
President:		<u> </u>	
Address:		1	
	Gypr P		 ÷
Vice President:	;		
Address:			~" [
	· · · · · · · · · · · · · · · · · · ·		
Secretary:	:	iл	
Address:			
Treasurer:			
Address:	*i 3* .		
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.		
Signature of Director or Officer	<u> </u>		
The officer or director signing this document (and who is listed in number 11 above) affirms the are true and that he or she is aware that felse information submitted in a document to the Department of the Depa	for the three series	herein astitutes	
a third degree felony as provided for in \$.817.155, F.S.			
13.	RMAN		
(Typed or printed name and capacity of person signing application)			

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ONDORE INC." 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 TWENTIETH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ONDORE INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE HEEN PAID TO DATE.

A Local State of the Local State

Authentication: 201903797

Date: 01-20-17

5183426 8300 SR# 20170350251

You may verify this certificate online at corp.delaware.gov/authver.shtml