

FI90000004255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

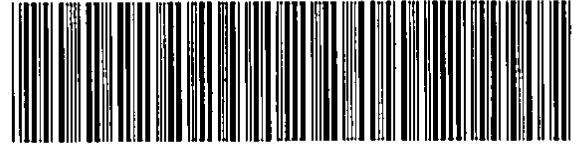
(Business Entity Name)

(Document Number)

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

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B KINSEY  
SEP 19 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GOLCONDA GROUP HOLDINGS INC

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:

WENKAI LIU

Name of Person

GOLCONDA GROUP HOLDINGS INC

Firm/Company

9750 SUNRISE LAKES BLVD

Address

SUNRISE, FL 33322

City/State and Zip code

TONYESCANO@HOTMAIL.COM

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

For further information concerning this matter, please call:

WENKAI LIU

647

969-6638

at ( )

Name of Person

Area Code

Daytime Telephone Number

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**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:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

GOLCONDA GROUP HOLDINGS INC

1. \_\_\_\_\_  
(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. CANADA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/31/2019 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. 252 BECKENHAM DR, KISSIMMEE, FL 34758  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: BEBI SAWH

Office Address: 252 BECKENHAM DR

KISSIMMEE, Florida 34758  
(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.

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

A. DIRECTORS

Chairman: Jia Rong Cai

Address: 34 Stollery Pond cres, Markham ON, L6C 0V1  
Canada

Vice Chairman: Wenkai, Liu

Address: 160 Greenwood Rd, Stouffville ON, L4A 4N7  
Canada

Director: Ruo Xian Liu

Address: 34 Stollery Pond cres, Markham, ON, L6C 0V1  
Canada

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

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

B. OFFICERS

President: Wen Kai, Liu

Address: 160 Greenwood rd, Stouffville ON, L4A 4N7  
Canada

Vice President: Jia Rong Cai

Address: 34 Stollery Pond cres, Markham, ON, L6C 0V1  
Canada

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

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

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

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

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

12. Wenkai, Liu

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. Wenkai, Liu President

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

2018 SEP - 9 PM 4:18



## Certificate of Existence

*Canada Business Corporations Act  
s. 263.1(1)(c)*

## Certificat d'existence

*Loi canadienne sur les sociétés par actions  
art. 263.1(1)*

GOLCONDA GROUP HOLDINGS INC.

Corporate name / Dénomination sociale

1154521-3

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation  
named above was in existence under the  
*Canada Business Corporations Act* on 2019-  
09-04 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société  
ci-dessus mentionnée existait en vertu de la  
*Loi canadienne sur les sociétés par actions*  
le 2019-09-04 (AAAA-MM-JJ).

Raymond Edwards

Director / Directeur

2019-09-04

Issuance date (YYYY-MM-DD)  
Date d'émission (AAAA-MM-JJ)