## F21000003209

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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FILED &

1011



September 28, 2021

NED MATTESON 8270 CONSUMER CT SARASOTA, FL 34240

SUBJECT: HDIP INC.

Ref. Number: F21000003209

We have received your document for HDIP INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FOREGIN PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Letter Number: 921A00023360

Catherine M Brumbley Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

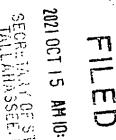
are

TO: Amendment Section Division of Corporations	
SUBJECT:	HDIP INC Name of Corporation
	F 2 10 0000 3209
	an Corporation to Change/Add Officer(s) and/or Director(s) and fee
Please return all correspondence	concerning this matter to the following:
Name of Contact	Heson Person
HOIP INC	pany
8270 Consus	mes ct.
	L 34240 Zip Code
E-mail address: (to be used for	future annual report notification)
For further information concerning	ng this matter, please call: 6537
Name of Contact Person	at (54) 550 - 6537  Area Code & Daytime Telephone Number
Enclosed is a check made payabl	e to the Florida Department of State for the following amount:
□\$35.00 Filing Fee □ \$43.75 I Certifica	Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, tre of Status  Certified Copy (Additional copy is enclosed)  Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



## AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD EFFERS (S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

\ <u>-</u>	5349 246 246 246 246 246 246 246 246 246 246
1. The name of the foreign corporation as it ap	opears on the records of the Florida Department of State is:
2. This entity was authorized to transact busin number is F210000 320	less in Florida on $\frac{5/21/2021}{2000}$ and its Florida document
3. This corporation was formed under the laws	_
4. The name and address of each officer and/o	or director is as follows:
President & Societary	Ned Matteson 8270 Consumer Ct. Sarasta, FL 34240
Viæ-President	Molly Matteson 8270 Consumer (t. Savasota, FL 34240
(Attach additio	onal pages if necessary)
A .	President
mature of an officer or director	Title of person signing
ed or printed name of person signing	FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations\*PO Box 6327\*Tallahassee, FL 32314