

April 11, 1995

Corporate Records Bureau Division of Corporations PO Box 6327 Tallahassee, Fl 32314

400001457294 -04/14/95-01116--007 *****70.00 *****70.00

RE: Orlan US Imports, Inc. 9410312448200

Dear Sir or Madam:

Englosed please find:

-Application for Authority -Certificate of Good Standing -payment of \$70.00

iding W95-8123

Please file and return all related correspondence to my attention at the address listed above.

Please feel free to contact me directly at 1-302-575-0440, with questions regarding the enclosed application.

Sincerely,

Susan P. Rosenthal Corporate Service Representative SECRETARY OF STATE OF

enc.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1995

SUSAN P. ROSENTHAL
THE COMPANY CORPORATION
201 N. WALNUT ST., 3 CHRISTINA CENTRE
WILMINGTON, DE 19801

SUBJECT: ORLAN US IMPORTS, INC.

Ref. Number: W95000008125

We have received your document for ORLAN US IMPORTS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Section 607.1502(4) or 617.1502(4), Florida Statutes, requires this office to collect a \$500 penalty fee for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate arrual report fees that would have been due this office had the corporation qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$700.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

Letter Number: 795A00017695

Jennifer Sindt Document Examiner SECULE AND CALCULATE SECURE AND CALCULATE SECURE AND CALCULATE SECURE AND CALCULATE SECULE AND CALCULATE SECURE AN

Orlan US imports, Inc. 639 Cleveland Street, Suite 200 Clearwater, FL 34615 Tel. (813) 447-8855 Fax (813) 446-4737

Mrs. Jennifer Sindt Division of Corporations State of Florida PO Box 6327 Tallahassee, FL 32314 29 June 1995

DE BILL E MI OF EL

Re: Application for Authority/Florida

Dear Mrs. Sindt

I received a letter from The Company Corporation stating that the State of Florida was assessing a penalty of \$700.00 for having reported a date for commencement of business in Florida prior to our application for authority in the State of Florida.

After having read the Florida Statutes (1993) that you sent us via The Company Corporation, I believe that the penalty assessment is not correct. The only business that I, though my company, Orlan US Imports, Inc., have performed is the following:

- 1. I have purchased goods from India once.
- 2. I have also purchased goods from Los Angeles, CA.
- 3. I have sold goods through four independent contractors, three of them being out of state.
- 4. I have opened a business checking account.

I would really appreciate your help in getting my company registered in Florida as soon as possible so that I can start expanding and finding local business.

Sincerely.

Florence Vanleuven

Michelle of Kaya

My Commission CC377850 Expires Jun. 02, 1998 Bonded by ANB 800-852-5878

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:

November 7, 1994 (Date of Incorporation) November 15, 1994 (Duration: Year corp. will cease to exist or perpetual) (See Sections 607.1501, 607.1502, and 817.155, F.S.) (See Sections 607.1501, 607.1502, and 817.155, F.S.) (Current mailing address) Importation (Current mailing address)	Delaware	yof which it is incorporated) 3. 59-32755	63	
November 15, 1994 Jate first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.) 639 Cleveland Street Suite 200 Clenrwater, FL 34615 (Current mailing address) Importation [Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: Name: Florence Vanleuven Office Address: 639 Cleveland Street Suite 200 Clearwater Florida, 34615				_ 😄
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ving been named as registered agent and to accept service of process for the above stated coration at the place designated in this application, I hereby accept the appointment as is started agent and agree to act in this capacity. I further agree to comply with the provisions	Name: Office Address: Registered agent's aving been named as responsition at the place of	ress of Florida registered agent: Florence Vanleuven 639 Cleveland Street Suite 200 Clearwater , Flori acceptance: gistered agent and to accept service of processing action, I hereby accept to act in this appaication, I further agree to ce	da , 34615 (Zip Code) cess for the above cept the appointmomply with the prov	stated ent as isions
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11. 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.

Names and addresses of officers and/or directors: DIRECTORS Chairman: FLORENCE VANLEUVEN Address: _____ <u>Clenzwater</u> Vice Chairman: Address: ____ Director: _____ Address: _____ Director: Address: _____ В. **OFFICERS** Address: _ Vice President: _____ Address: _ Secretary: Address: Treasurer: Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

RESident & all of the Above.

State of Delaware Office of the Secretary of State

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Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: