# F95000003785

900001546919 -07/26/35--01001--022 \*\*\*\*131.25 \*\*\*\*131.25 TO: Qualification/Tax Lien Section **Division of Corporations** W95-15238 Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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: (Name of Person) (Firm/Company) : : : Should you need to call someone concerning this matter, please call:

D. E. CORNELL at (BIS ) B36 - 4905

(Name of Person) (Area Code & Daytime Telephone Number)

# **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

# **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 28, 1995

D.E. CORNELL WOH-YAH-TE INDIAN FEDERATION, INC. 405 CENTRAL AVE - SUITE 201 "B" ST PETERSBURG, FL 33701

SUBJECT: WOH-YAH-TE INDIAN FEDERATION, INC.

Ref. Number: W95000015238

We have received your document for WOH-YAH-TE INDIAN FEDERATION, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Be aware that the form you have submitted is for a For-Profit corporation. If your corporation is in fact Non-Profit, please use the form in the booklet we are sending today under separate cover. Also, please submit a photocopy of the corrected application if you would like a stamped copy returned to you.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The date first transacted business in Florida within the meaning of s. 607.1501, F.S., must be set forth in section 6 of the application. If the corporation has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office is required to collect the minimum civil penalty of \$500 for each year other than the application filing year, that a foreign corporation transacts business in this state without authority along with the past annual report fees due this office.)

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
If you have any questions concerning thing to your document, please call (904) 487-6958.

Lee Rivers Document Examiner

Letter Number: 495A00035915

To: Florida Department of State Division of Corporations P.O. Box 6327, Tallahassec, Fla.

Ref: Woh - Yah - Te Indian Federation Registration

Attn: Mr. Lee Rivers

Dear Sir:

I have corrected the enclosed application per your intructions and have included an original Certificate of Incorporation as instructed.

Thank you for your assistance.

D.E.Cornell

3 AVA 1995

# 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: (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. 16 10 1 1995

(Date of Incorporation)

5. PERPETURE

(Duration: Year corp. will cease to exist or "perpetual" (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) 7. 105 CENTRAL RVE. ST PETERS BURG FLA Suite 201 \*B" (Current mailing address) EDUCATION AND ENTERTAINMENT
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: RETER C. FISCHBACH Office Address: 405 CENTRAL AVENUE

ST. RETERSBURG, Florida, 3370/
(Zip Code)

10. 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.

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.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: D. E. CORNELL Address: 105 CENTRAL ANE OF PETERSBURG TO Vice Chairman: Address: \_\_\_ Director: TRUDI CORNELL STG 2018 Address: 105 CENTERI QUO. Director: \_\_\_ Address: \_\_\_ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: D. G. LORNELI SUITE 201"B" Address: 405 Courpay AVE ST PETERS EVEG 33701 Vice President: \_\_\_\_\_ Address: \_\_\_\_\_ Secretary: / RUDI Address: 405 CENTEAL AVE Address: AROVA NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors (Seplatore of Chairman, Vice Chairman, or any other listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

# GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS BUSINESS REGULATION ADMINISTRATION



# CERTIFICATE

THIS IS TO CERTIFY that all applicable provisions of the DISTRICT OF COLUMBIA BUSINESS CORPORATION ACT have been complied with and accordingly, this CERTIFICATE of INCORPORATION is hereby issued to WOH-YAH-TE INDIAN EPDEDATION TWO WOH-YAH-TE INDIAN FEDERATION, INC.

as of MAY 16TH, 1995

Hampton Cross Director

Katherine A. Williams Acting Administrator

Buginess Regulation Administration

Vesuce m. Jones Desiree M. Jones

Act. Asst. Superintendent of Corporations

Corporations Division

Marion Barry, Jr. Mayor