Qualification/Tax Lien Section **Division of Corporations** 

CinDon Enterprises, Inc. SUBJECT: (Name of corporation - must include suffix)

Dear Sir or Madam:

TO:

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:

Dennis J. Osleczanok	~~~~~1 ~~~~
(Name of Person)	
CinDen Enterprises, Inc.	
(Firm/Company)	96 JI SECRI TALLA
1819 El Paso Trail (Address)	ARE TO
Gulf Breeze, FL 32561 (City/State/Zip)	FILED 96 JUN 20 AN 9: 55 SECRETARY OF STATE ALLAHASSEE, FLORID,
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Should you need to call someone concerning this matter, please call:

Dennis J. Osieczanek	at	( 904	) 932-1522
(Name of Person)		(Area Cod	e & Daytime Telephor

ie Number)

### **COURIER ADDRESS:**

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

#### **MAILING ADDRESS:**

Qualification/Tax Lien > Division of Corporation P. O. Box 6327 Taliahassee, FL 3231-

# 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:

	CinDon Entorprises, Inc.	
	(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.)	
2	Dolawaro	
2.	Oct award  (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (FBI number, if applicable)	
	Tours of country affect the fair of which is is most prairies.	
4.	May 17, 1996  (Date of Incorporation)  (Duration: Year corp. will ceased exist or "perpetual")	
	(Date of Incorporation) (Duration: Year corp. will ceased exist or "nernatual")	
	ARE JUN 70	
6.		
	m¬ <b>、 v</b>	
7	1819 Et Paso Trait	
••		
	Gulf Breeze, FL 32561	
	Gulf Breeze, FL 32561	
	(Current mailing address)	
8.	Vinyl Siding Installation	
8	Vinyl Siding Installation (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	
9.		
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name:	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819_EL.Paso_Trail.  Gulf Breeze Florida 32561	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819 Et Paso Trait  Gulf Breeze , Florida , 32561 (Zip Code)	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819_EL Paso_Trail	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819 Et Paso Trait  Gulf Breeze , Florida , 32561 (Zip Code)  Registered agent's acceptance:	
9. 10. <i>Ha</i> r	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819_EL.Paso_Trail.  Gulf Breeze, Florida , 32561	4
9. 10. <i>Ha</i> rcor	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819 Et. Paso Trail  Gulf Breeze , Florida , 32561 (Zip Code)  Registered agent's acceptance:  ving been named as registered agent and to accept service of process for the above stated poration at the place designated in this application. I hereby accept the appointment of	c
9.  10.  Harcory	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819 EL Paso Trail  Gulf Breeze , Florida , 32561  (Zip Code)  Registered agent's acceptance:  ving been named as registered agent and to accept service of process for the above states poration at the place designated in this application, I hereby accept the appointment as istered agent and agree to act in this capacity. I further agree to comply with the provisions of	s f
9.  10.  Harcorregall	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Dennis J. Osieczanek  Office Address: 1819 Et. Paso Trail  Gulf Breeze , Florida , 32561 (Zip Code)  Registered agent's acceptance:  ving been named as registered agent and to accept service of process for the above stated poration at the place designated in this application. I hereby accept the appointment of	s f

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.

(Bogistered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIKEC	TORS (Street address only- P. O. Box NOT acceptable)	
Chairman:	Donnis J. Osloczanok	
Address: _	1819 Et Paso Trait (\$15 %)	
***	Gulf Broozo, FL 32561	
	nun: <u>Cynthla J. Osloczanok</u>	
Address: _	1819 Et Paso Trait	
	Gulf Broozo, FL 32561	
Director: _		
Address:		
_		
Director: _		
Address: _		
<u>-</u>		
	RS (Street address only- P. O. Box NOT acceptable)	
_	Dennis J. Osieczanek	
Address:	1819 El Paso Trail	
	Gulf Breeze, FL 32561	
	nt: Cynthia J. Osleczanek	
Address:	1819 EllPaso Trail	0 ]
_	Gulf Breeze, FL 32561	- Trap
Secretary: _	Cynthia J. Osleczanek	7
Address: _	1819 Et Paso Trait	7
_	Gulf Breeze, FL 32561	
Treasurer: _	Dennis J. Osieczanek	
Address:	1819 EL Paso Trail	
	Gulf Breeze, FL 32561	
NOTE: If n	ecessary, you may attach an addendum to the application listing additional or directors.	÷
13. (Sign	ennies I Oscarauek ature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Dennis J. Osieczanek, President  (Tyred or printed name and capacity of person signing application)	

## State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREDY CERTIFY "CINDEN ENTERPRISES, 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 TWENTY-SECOND DAY OF MAY, A.D. 1996.

AND I DO HEREDY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVL NOT BEEN ASSESSED TO DATE.



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

7955927

DATE:

05-22-96

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