# To: **Division of Corporations**

hunderland (Name of corporation - must include suffix) 7000 Dear Sir or Madam: \*\*\*\*\*70.00 \*\*\*\*\*70.00 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: (Firm/Company) (Address) (City/State/Zip) Should you need to call someone concerning this matter, please call (Area Code & Daytime Telephone Number) (Name of Person) **MAILING ADDRESS:** STREET ADDRESS: Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines St.

Tallahassee, FL 32399

Tallahassee, FL 32314



August 4, 1998

RICHARD KLEINBERG THUNDERLAND CORPORATION 614 ROLLINGWOOD LN VALRICO, FL 33594

SUBJECT: THUNDERLAND CORPORATION

Ref. Number: W98000017678

We have received your document for THUNDERLAND CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 998A00040773

## 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.
THUNDER LAND CORP
(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. Deleware 3. 59-3454716
(State or country under the law of which it is incorporated) 4
(Date of incorporation) (Duration: Year corp. will clase to exist or "perpetual")
6. None
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  7. 614 ROUMWOOD SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
Valrico +L 33594
(Current mailing address)
8. CONSULTING/STAFFING
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Pland Kleinberg OR EVA Kleinberg
Office Address: 614 Pollingwood Lane
Valrico, Florida, 33594
(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.

(Registered agent's signature)

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: Picharo Kleinberg
Address: 614 Relligwood lane Valrice Ft 33594
Vice Chairman:
Address:
Director:
Address:
Address.
Director:
Address:
NDA ##
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: RIMAND KIEUNDENS
Address: 6 4 ROLLINGWOOD LIN
Valrico +2 33594
Vice President:
Address:
Secretary:
Address: 614 Rollywood LN
Valricol +2 33594
Treasurer:
Address:
NOTE: If necessary, you may attach an addendam to the application listing additional officers and/or directors.
13. Jeland Looj
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. (Typed or printed name and capacity of person signing application)
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#### State of Delaware

#### PAGE 1

### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THUNDERLAND CORP." 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 TWENTIETH DAY OF JULY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

98 AUG 18 MM 9: 44 SECRETARY OF STATE TALLAHASSEE FLORIDA

2713145 -8300 981279483



9204328

W07-20-98

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

DATE: