

State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

RULULO TOPE STATE
ENDOTATE DIV

Application for Certificate of Authority Foreign Business Corporation

Filing and License Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

The name of the corporation is:				
CDR Enterprises, Inc.				
2. It is incorporated under the laws of:	Florida			
3. The name, if different, which it elects to use in Rhode	e Island is:			
(a) If the name of the corporation in its jurisdiction of ine "incorporated", or "limited," or an abbreviation thereof, t the above corporate endings for use in Rhode Island:	corporation does not contain the word "corporation", "company", then list the name of the corporation with the addition of one of			
(b) If the corporate name is not available in Rhode Islar corporation will qualify and transact business in Rhode be filed with this application:	nd, then set forth below the fictitious name under which the Island as stated in the "Fictitious Business Name Statement" to			
4. The date of its incorporation is:	October 11, 2008			
And the period of its duration is: CHECK ONLY ONE B Perpetual (on-going)	зох			
Date certain for dissolution				
5. The address of its principal office is:				
8669 NW 36 STREET, SUITE 340, MIAMI, FL 33166				

FILED
FEB 1 3 2017
BY 295548

Form No 150 Revised, 2016

6. The name and addr	ess of the initial	l registered ag	ent/office	of in Rhode Island:		
Agent Name DORA	LEAL					
Street Address (NOT a	P.O. Box) 22	5 CHAPMA	AN STRI	EET, 4TH FLOO	R	
City/Town PROVIDENCE		State RHODE ISLAND		Zip Code 02905		
7. The purpose or purp	poses which it p	roposes to pu	rsue in the	e transaction of busi	iness in Rhode Island are:	
CONSULTING SE	RVICES					
8. (a) The names and is state or country of which	respective addre	esses of its di ated):	rectors (o _l	otional, unless direc	tors are required under the laws of the	
NAME				ADDRESS		
CARLOS A. DUAR	ART 8669 NW 36 STRE			EET, SUITE 340, MIAMI, FL 33166		
ANDRE A. DUAR	8669 NW 36 STRE			EET, SUITE 340, MIAMI, FL 33166		
IRWIN GROSS 8669 NW 36 STF			36 STRI	REET, SUITE 340, MIAMI, FL 33166		
				Check	the box to indicate an attachment.	
8. (b) The names and r laws of the state or cou	espective addre	esses of its pri	ncipal offi d):		lirectors are not required under the	
OFFICE	NAME			ADDRESS		
PRESIDENT	CARLOS A. DUART			8669 NW 36 ST., STE 340, MIAMI, FL 33166		
VICE PRESIDENT	ANDRE A. DUART			8669 NW 36 ST., STE 340, MIAMI, FL 33166		
TREASURER	CARLOS A. DUART			8669 NW 36 ST., STE 340, MIAMI, FL 33166		
SECRETARY	KATRINA KERR			8669 NW 36 ST., STE 340, MIAMI, FL 33166		
				Check t	the box to indicate an attachment.	
9. The aggregate numb	er of shares wh	ich it has auth	nority to is		sses, par value of shares, shares	
without par value, and s	series, if any, wi	thin a class, is	3:			
NUMBER OF SHARES	CLASS		SEF			
1,000	COMMON ST			\$1.00		
				•		
					VIPINIA III.	
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10. (a) Estimate, in dollars, the value of all proplocated:	erty to be owned by the corporation for the follo	wing year, wherever			
\$_0.00					
(b) Estimate, in dollars, the value of the corporation year:	on's property to be located within Rhode Island	during the following			
\$ <u>0.00</u>					
(c) Estimate, as a percentage , the proportion that within this state during the following year bears to following year, wherever located. <i>Note: Divide (10)</i>	the value of all property of the corporation to b	e owned during the			
%					
11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.					
\$ 2,000,000.00					
(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.					
\$_100,000.00					
(c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.					
%					
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.					
13. Date when the Certificate of Authority will be e	ffective: CHECK ONLY ONE BOX				
✓ Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the day of filing)					
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.					
Signature of Authorized Officer of the Corporation	Type or Print Name of Authorized Officer	Date			
Kathen for	KATRINA KERR	02/07/2017			
		<u> </u>			

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

State of Florida Department of State

I certify from the records of this office that CDR ENTERPRISES, INC. is a corporation organized under the laws of the State of Florida, filed on October 13, 2008, effective October 11, 2008.

The document number of this corporation is P08000092546.

I further certify that said corporation has paid all fees due this office through December 31, 2016, that its most recent annual report/uniform business report was filed on February 2, 2016, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Thirtieth day of January, 20 Pe



Ken Defran Secretary of State DESCRIPTION STATE

Tracking Number: CU7481366412

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

