F06000007377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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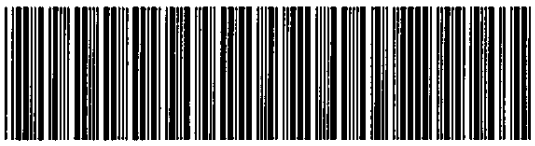

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TALLAHASSEE, FLORIDA

cs. 11-29

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Dhongak Tharling
(Name of Corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Ngawang Tsultrim Lama
(Name of Person)

Dhongak Tharling
(Firm/Company)

3621 De Saix Blvd.

(Address)

New Orleans, La 70119
(City/State and Zip Code)

For further information concerning this matter, please call:

Ngawang Tsultrim Lama at (504) 301-2174
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ $70.00 Filing Fee ☒ $78.75 Filing Fee & Certificate of Status ☐ $78.75 Filing Fee & Certified Copy ☒ $87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Dhongak Harling, Inc.
(Name of corporation: must include the word "INCORPORATED" or "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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Louisiana
(State or country under the law of which it is incorporated)

3. 72-1264270
(FEI number, if applicable)

4. 3/31/94
(Date of Incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first conducted affairs in Florida if prior to registration. *See sections 617.1501 & 617.1502, F.S, to determine penalty liability.*)

7. 3621 De Saix Blvd, New Orleans, La 70119
(Principal office address)

3621 De Saix Blvd, New Orleans, La 70119
(Current mailing address)

8. nonprofit religious & cultural organization
(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 **NOT** acceptable)

Name: Felicia McQuaid

Office Address: 37 Ranger St.

Ft. Walton Beach (City), Florida 32548 (Zip Code)

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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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: Ngawang Tsultrim Lama

Address: 3621 DeSaix Blvd.
New Orleans, La 70119

Vice President: Laura Tyree

Address: 51 Laurie Dr.
Fort Walton Bch, Fl. 32548

Secretary: Felicia McQuaid

Address: 37 Ranger St. Ft. Walton Bch., Fl. 32548

Treasurer: Felicia McQuaid

Address: 37 Ranger St. Ft. Walton Bch, Fl. 32548

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ngawang Tsultrim Lama Pres.
(Typed or printed name and capacity of person signing application)

United States of America
State of Louisiana

As Secretary of State, Jay Dardenne, I do hereby Certify that

DHONGAK THARLING

A corporation domiciled in NEW ORLEANS, LOUISIANA,

Filed charter and qualified to do business in this State on March 31, 1994,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State as a Non-Profit Corporation.

In testimony whereof, I have hereunto set
My hand and caused the Seal of my Office
To be affixed at the City of Baton Rouge on,
November 20, 2006

Secretary of State
34459722N

Certificate ID: 20061120002619

To validate this certificate, visit the following web site, go to **Commercial Division**, ***Validate Certificate***, *then* follow the instructions displayed.
www.sos.louisiana.gov