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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

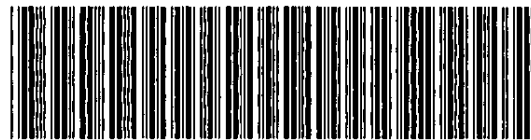
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 OCT 20 AM 9:32  
TALLAHASSEE  
STATE

OCT 25 2016  
J. HARRIS

  
The logo consists of the letters 'D', 'H', and 'G' in a large, bold, outlined font. The 'D' and 'G' are connected to the 'H'.

DAVID H. GREENBERG  
COUNSELOR AND ATTORNEY AT LAW  
Admitted Florida & New York Bars  
1371 South Andrews Avenue - Pompano Beach, Florida 33069  
TELE: (954) 943-2800  
FAX: (954) 943-1314  
EMAIL: getdavidhg@gmail.com  
Cellphone: (954) 560-3283

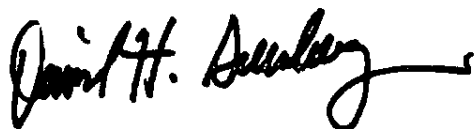
October 14th, 2016

TO: Secretary of State  
RE: Kangapoda, Inc. & Enhancement Associates, LLC-FOREIGN FILING

Dear Sirs;

Please see attached completed and executed Foreign entity filing forms for the above listed entities and required filing fees for each of the above listed entities along with required filing fees for each. Please process the filing and call me with any questions at 954-560-3283. Thank you,

Very truly yours,

A handwritten signature in black ink that reads 'David H. Greenberg' with a stylized flourish at the end.

David H. Greenberg  
DHG/rj

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KANGAPODA CORPORATION  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

HARDY MINTZ  
Name of Person

KANGAPODA CORPORATION  
Firm/Company

100 OLD PALISADE ROAD, PL-14  
Address

FT LEE, NJ 07024  
City/State and Zip code

hmintz@kangapoda.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID GREENBERG GSR at (954) 560-3283  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

70303670  
"SECRETARY'S SIGNATURE"

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.

1. KANGAPODA CORPORATION
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

n/a
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW JERSEY 3. 45-5522688
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 18th 2012 5. PERPETUAL
(Date of incorporation) (Date of duration, if other than perpetual)

6. SEPTEMBER 29th 2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1383 SW 12th AVENUE
(Pincipal office address)
POMPANO BEACH, FL 33069
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: HAROLD P. MINTZ

Office Address: 1383 SW 12th AVENUE
POMPANO BEACH, Florida 33069
(City) (Zip code)

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9. 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.

[Signature]
(Registered agent's signature) HAROLD P. MINTZ

10. 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.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Harold P. Mintz

Address: 1383 SW 12th Avenue

Pompano Beach, FL 33069

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Harold P. Mintz

Address: 1383 SW 12th Avenue

Pompano Beach, FL 33069

Vice President: Harold P. Mintz

Address: Same as above

Secretary: Harold P. Mintz

Address: Same as above

Treasurer: Harold P. Mintz

Address: Same as above

16 OCT 20 AM 9:32  
HAROLD P. MINTZ  
PRESIDENT

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

12.  [Signature] Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Harold P. Mintz, President

(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

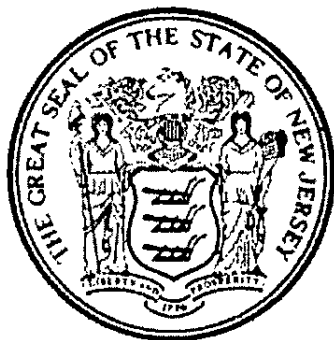
**KANGAPODA CORPORATION  
0400500339**

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on June 18, 2012.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

HAROLD P. MINTZ  
100 OLD PALISADE ROAD  
PL-14  
FORT LEE, NJ 07024



*IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 29th day of September, 2016*



Ford M. Scudder  
State Treasurer

Certificate Number: 6074595597

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCertJSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCertJSP/Verify_Cert.jsp)