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SECRETARY OF STATE
MALLAHASSEE, FILES

FEBOTIONS

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 15, 2016

TIFFANY MURPHY 1762 OLD STAGE RD DECORAH, IA 52101

SUBJECT: TOPPLING GOLIATH INC. DBA TOPPLING GOLIATH BREWING

CO.

Ref. Number: W16000002917

We have received your document for TOPPLING GOLIATH INC. DBA TOPPLING GOLIATH BREWING CO. and your check(s) totaling \$87.50.000 However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the doing business as name in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 416A00001015

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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TO: Registration Section
Division of Corporations

Toppling Goliath Inc. Correcting original application. Ref Number W16000002917. Letter number

SUBJECT: 416A00001015

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: Tiffany Murphy

	Name of	Person			
Toppling Goliath Inc					
1762 Old Stage Rd	Firm/Con	npany	14. E. C.	216	aev
Decorah, IA 52101	Addr	ess	13.1 (1) 20.1 (1) 20.1 (1) 20.1 (1) 20.1 (1) 20.1 (1)	25 25	44.213
iffany@tgbrews.com	City/State a	14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	. <u>.</u>	Žima ji	
E-mail	address: (to be used	for future annual report	t notification)	S	
For further information concerning	ng this matter, please	call:			
Fiffany Murphy	563 at (382-6198			
Name of Person	Area Cod	le Daytime Tele	phone 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

			A		
Enclosed	is a	check	for the	following	amount:

□ \$70.00 Filing Fee	□ \$78.75 Filing Fee &
	Certificate of Status

\$78.75 Filing 1	Fee	&
Certified Copy	/	

□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. Toppling Goliath Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 48-1295884 Iowa 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) November 15, 2002 (Date of duration, if other than perpetual) (Date of incorporation) n/a (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1762 Old Stage Rd., PO Box 477, Decorah, IA 52101 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Brew Hub Name: 3900 S Frontage Road Office Address: Lakeland (City)

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.

(Registered agent's signature)

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 Clark Lewey Chairman: 1637 Augusta Road Address: Decorah, IA 52101 Barbara Lewey Vice Chairman: 1637 Augusta Road Address: Decorah, IA 52101 Director: ___ Address: **B. OFFICERS** Clark Lewey President: 1637 Augusta Road Address: Decorah, IA 52101 Barbara Lewey Vice President: 1637 Augusta Road Address: Deocrah, IA 52101 Secretary: ___ Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Barbara Lewey 13.

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

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Date: 1/25/2016

Name: TOPPLING GOLIATH, INC. (490 DP - 272397)

Date of Incorporation: 11/15/2002

Duration: PERPETUAL

- I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. Articles of dissolution have not been filed.

Certificate ID: CS116645

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State