# F8000004933

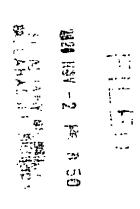
(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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### **COVER LETTER**

TO:	_	tration Section of Cor				5	
			dings, Inc.				
SUBJ	ECT:		Name	of corporation	<del>-</del> )П -	must include suffix	
_			, ,				
Dear S	Sir or M	adam:					
"Certi	ficate of	f Existenc	•	of Good St	and	uthorization to Transacing" and check are substin Florida.	
Please Jared S		all corresp	ondence concern	ing this matt	er t	o the following:	
				Name o	f Pe	erson	
Stark '	Weber P	LLC					
				Firm/Co	mp	any	
1200 3	North Fe	deral Highv	way, Suite 200				
				Λdc	res	s	· · · · · · · · · · · · · · · · · · ·
Boca l	Raton, F	L 33432					
			<del></del>	City/State	and	i Zip code	
devir@	Bbarkbui	ldings.com	l				
			E-mail addres	s: (to be used	fo	r future annual report n	otification)
For fu	rther in	formation	concerning this r	natter, please	ca	II:	
Jared :	Stark			888		421-0589 Extension 1	
	Name	e of Perso	n	Area Co	ode	Daytime Telepl	none Number
		EET/COU tration Se	FRIER ADDRES	6S:		MAILING Al Registration S	
Division of Corporations				Division of Corporations			
	2661	n Building Executive nassee, FL	Center Circle			P.O. Box 6327 Tallahassee, F	
Enclos	sed is a	check for	the following am	ount:			
<b>3</b> \$7	0.00 Fil	ing Fee	□ \$78.75 Filir Certificate			\$78.75 Filing 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.

(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  Delaware  2.	Bark Buildings,	Inc.		
2. Delaware  (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of duration, if other than perpetual)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Description	(Enter name of co	orporation; must include "INCORPORATED," "orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	•
2. Delaware 2. (State or country under the law of which it is incorporated) 4. (Date of incorporation)  (Date of incorporation)  (Date of duration, if other than perpetual)  6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Delaware   1200 North Federal Highway, Suite 200   1200 North Federal Highway, Su	(If name unavaila	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting business in Flo	 orida)
4. January 3, 2018  (Date of incorporation)  (Date of duration, if other than perpetual)  6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark	Delaware	·	,	,
(Date of incorporation)  (Date of duration, if other than perpetual)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark	(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark	January 3, 2018	_		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark	4	5.	(Day 64 2) 16 4 4 1 1 1	
(Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Jared Stark  Name:    1200 North Federal Highway, Suite 200   Box Raton   Florida   Florida	(Date	of incorporation)	(Date of duration, if other than perpetual)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  2000 N Bayshore Drive Unit# 1409, Miami, FL 33137  (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark	6.			
7. (Principal office address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark		(Date first transacted business in Fl	orida, if prior to registration)	
7		(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)	
(Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Jared Stark  Name:  1200 North Federal Highway, Suite 200  Boca Raton  Florida  33432				
(Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    1200 North Federal Highway, Suite 200	<i>1</i>		office address)	
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    Jared Stark		(**************************************	5,7-55 <u>5.1.5</u> 5.1.7	
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:    1200 North Federal Highway, Suite 200		(0)	11 (0.170)	
Name:    Jared Stark		(Current mailing a	iddress, if different)	
Name:    Jared Stark			- PR	
Name:    1200 North Federal Highway, Suite 200	8. Name and street	et address of Florida registered agent: (P.O. I	DUA INCLI ALLCCHIADRCI 34 ac maria.	
Name:    1200 North Federal Highway, Suite 200		Jared Stark		
Office Address:    Boca Raton   33432	Name:		_ '; ' ' ' '	
Boca Raton , Florida,	065 A 44	1200 North Federal Highway, Suite 200	American Company of the Company of t	
, Florida	Office Address:	Boca Raton	33432	
(City) (Zip code) ﷺ نُتُ		(City)	, Florida	

#### 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 Devier Zivan Chairman: 2000 N Bayshore Drive Unit# 1409, Miami. FL 33137 Address: Vice Chairman: Director: \_\_\_\_ Address: \_\_\_\_\_ **B. OFFICERS** Devier Zivan President: 2000 N Bayshore Drive Unit# 1409, Miami, FL 33137 Address: Vice President: Address: \_\_\_\_\_ Secretary: \_\_\_\_\_\_ Address: \_\_\_\_\_ Address: \_\_\_\_\_ 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. Devier Zivan 13.

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



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BARK BUILDINGS, INC" 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 FOURTEENTH DAY OF OCTOBER, A.D.

2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BARK BUILDINGS, INC" WAS INCORPORATED ON THE THIRD DAY OF JANUARY, A.D. 2018.

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

Authentication: 203858625

Date: 10-14-20