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(Requestor's Name) (Address)
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PICK-UP WAIT MAIL
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(Document Number)
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TRANSMITTAL LETTER
TO: Registration Section Division of Corporations
SUBJECT: (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," 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: (Name of Person)
WILLIAM E, FALCK LAW OFFICE
3740 BEACH BOOLEVARD SUITE 201-1
JACKSONVILLE FL 32207
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at (904) 398-3644 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 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 & ☐ \$78.75 Filing Fee & Certificate of Status Certified Copy 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.
741 K, INC
(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)
2. DELAWARE (State or country under the law of which it is incorporated) 3. APPLIED FOR (FEI number, if applicable)
Told & 2000 12/14/01 PERDETINAL
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION)
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. S740 KEACH KLUD SUITE 2017, Jacks Unville (Principal office address) FL3 22
3740 REACH BLUD SUITE 201A, Jacksonville (Current mailing address)
8. COMMERCIAL DOCK (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: WILLIAM E. FALCK
Office Address: 3740 BEACH BLUD SUITE 201A
TACKCODUILE, Florida 32205 (City) (Zip code)
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.
William & Sold
(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 business addresses of officers and/or directors:

A, DIRECTORS	
Chairman: WALTER M. KEY	
Address: 4530 POT ROAD	
JACKSONVILLE FL 32226	
Vice Chairman:	
Address:	
Director:	
Address:	
77	
Director:	
Address:	
B. OFFICERS	
President: WALTER W.KEY	
Address: 4530 PAT RD	
JACKSONVILLE FL 32226	
Vice President:	
Address:	
Secretary: NALTER WKEY	
Address: SRR AROVE	
Treasurer: WALTER W. KEY	
Address: SEE AROUQ	-
ASSISTANT SECRETURY WILLIAM E. FALCK NOTE: If necessary, you may altach an addendum to the application listing additional officers and/or directors.	01
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	,
(Signature of Director or Officer listed in number 12 of the application)	
1) II a FALAM ASSISTANT CERAFTANI	
(Typed or printed name and capacity of person signing application)	

PAGE 1

Delaware

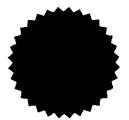
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "741K, 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 THIRTEENTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "741K, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2001.

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

2005 JUL 20 PM 1:58
2005 JUL 20 PM 1:58
2019 JUL 20 PM 1:58



Harriet Smith Windson Secretary of Source

AUTHENTICATION: 4017114

DATE: 07-13-05

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