

F100000001688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

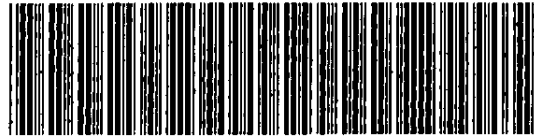
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/24/10--01018--003 **70.00

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AND
FILED

10 APR - 7 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: THE Combine Nation, Inc.

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:

Emory L. Williams

Name of Person

The Combine Nation, Inc.

Firm/Company

1247 NW 50th Street

Address

miami FL 33142

City/State and Zip code

hellofriend04@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emory L. Williams

Name of Person

at (305) 407-6010

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2010

EMORY L. WILLIAMS
1247 NW 50TH STREET
MIAMI, FL 33142

SUBJECT: THE COMBINE NATION, INC.
Ref. Number: W10000015155

We have received your document for THE COMBINE NATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$Total fees due: \$650.00..

Total fees due: \$650.00.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 410A00007531

Dear Ms. Herring,

Upon viewing the enclosed document, to be exact, line No. 6 an error was made, I have never billed out a document of this type before and misunderstood the asking. As of today, we have not conducted one act of business, it will be a while before we do so. I have made the correction on line 6, which should have been "upon/after acceptance."

Thank you very much for your help and courtesy over the phone today.

Thank you,

Erney A. Williams

**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. The Combine Nation, 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. Wyoming 3. 27-1458150
(State of country under the law of which it is incorporated) (FEI number, if applicable)

4. December 4, 2009 5. 2010
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon/after Acceptance.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1247 NW 50th Street Miami, FL 33142
(Principal office address)

SAME
(Current mailing address)

8. Clothing business
(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: Emory L. Williams

Office Address: 1247 NW 50th Street
Miami, Florida 33142
(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.

Emory L. Williams
(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.

10 APR - 7 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

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

10 APR -7 PM 2:20

A. DIRECTORS

Chairman: Emory L. Williams

Address: 1247 NW 50th Street
MIAMI, FL 33142

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Emory L. Williams

Address: 1247 NW 50th Street
MIAMI, FL 33142

Vice President: _____

Address: _____

Secretary: Emory L. Williams

Address: 1247 NW 50th Street MIAMI, FL 33142

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

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

State of Wyoming

Office of the Secretary of State



United States of America, }
State of Wyoming } ss.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 APR - 7 PM 220

APPROVED
AND
FILED

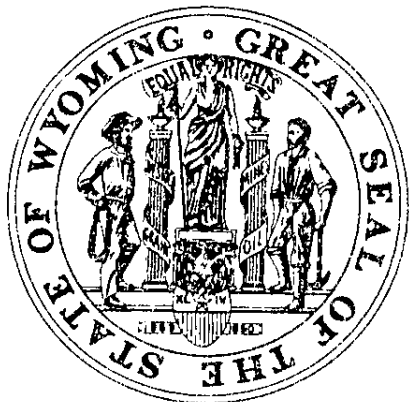
I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

The Combine Nation, Inc
is a
Profit Corporation

formed or qualified under the laws of Wyoming did on **December 4, 2009**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2009-000577553**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 16th day of March, 2010 at 11:12 AM.



Max Maxfield
Secretary of State

By *Walter J. Jaraman*