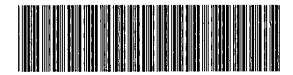
# F1200003890

(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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SECRETARY OF STATE
FALLAHASSEE, FLORING

9-24/3

#### **COVER LETTER**

TO:	O: New Filing Section Division of Corporations				
SUBJE	c <sub>CT:</sub> Squar	e One Ventures	Inc		
		<del></del>	ration - must include suffix		
Dear Si	r or Madam:				
"Certific	cate of Existence		n for Authorization to Transact Standing" and check are submusiness in Florida.		
Please re	eturn all corresp	ondence concerning this n	natter to the following:	•	
Lynn	Obester				
		Nam	ne of Person		
Lake	Wylie Tax	Service			
	<u> </u>	Firm	/Company		
4559	Charlotte	Hwy	; '		
Lake	Wylie, SC		Address		
<u></u>	1.5		tate and Zip code		
lynn@	)lakewylieta:	x.com			
		E-mail address: (to be u	used for future annual report no	tification)	
For furt	her information	concerning this matter, ple	ease call:		
Lynn	ynn Obester at ( 803 ) 831-6700				
	Name of Person		Area Code & Daytime Telephor	ne Number	
	New Filing Sect Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	
	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

### 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. Square One ventures inc	
(Enter name of corporation; must include "INCORPORAT	ED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
(If name unavailable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
2. South Carolina	<sub>3.</sub> 45-5380404
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 05/04/2012	5. perpetual
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6	
	ss in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 60	7.1502, F.S., to determine penalty liability)
7. 13845 Alvarez Rd, Suite 100, Jackson	<del></del>
(Principal office	address)
13845 Alvarez Rd, Suite 100, Jackson	onville, FL 32218
(Current mailing	address)
8. Logistics	
(Purpose(s) of corporation authorized in home state of	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: John T Whitley	
Office Address: 13845 Alvarez Rd, Suite 100	1
Jacksonville	, Florida 32218
(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.

(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: John T Whitley Address: 27 Heritage Court, River Hills, SC 29710 Vice Chairman: Address: Director: \_ Address: **B. OFFICERS** President: John T Whitley Address: 27 Heritage Court, River Hills, SC 29710 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 12 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. 14. John T Whitley - President

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

## The State of South Carolina



Office of Secretary of State Mark Hammond

#### **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

#### SQUARE ONE VENTURES INC.,

a corporation duly organized under the laws of the State of South Carolina on May 4th, 2012, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 7th day of September, 2012.

Mark Hammond, Secretary of State