

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 617-6381

From:

Account Name : LEGALZOOM.COM INC.
 Account Number : 120010000062
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FOREIGN PROFIT/NONPROFIT CORPORATION
GRACE THE TABLE, INC.

Certificate of Status	0
Certified Copy	1
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GRACE THE TABLE, 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," 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:

Tony Burroughs

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip code)

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For further information concerning this matter, please call:

Tony Burroughs

at (323) 962-8600

(Name of Person)

(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 & 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. **GRACE THE TABLE, 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. **NEVADA**

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. **10/26/2012**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)
(SBB SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **614 East Highway 50, Box 135 Clermont, FL 34711**

(Principal office address)

614 East Highway 50, Box 135 Clermont, FL 34711

(Current mailing address)

8. **Wholesale - Personnel Windmills**

(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)**

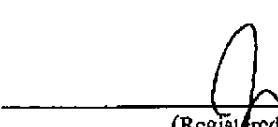
Name: United States Corporation Agents, Inc.

Office Address: 13302 Winding Oaks Blvd., Suite A

Tampa , Florida 33688
(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) Jacob Varghese, VP, on behalf of United States Corporation Agents, Inc.

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:

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A. DIRECTORSChairman: Danielle JonesAddress: 614 East Highway 50, Box 135 Clermont, FL 34711

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: Danielle JonesAddress: 614 East Highway 50, Box 135 Clermont, FL 34711

Vice President: _____

Address: _____

Secretary: Danielle JonesAddress: 614 East Highway 50, Box 135 Clermont, FL 34711Treasurer: Tirza EbanksAddress: 614 East Highway 50, Box 135 Clermont, FL 34711

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. _____

Danielle Jones, President

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

12 10/29
SHERIFF OF STATE
OF ALABAMA
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING**

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, GRACE THE TABLE, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 26, 2012, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 28, 2012.

A handwritten signature of Ross Miller.

ROSS MILLER
Secretary of State

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Electronic Certificate
Certificate Number: C20121128-1138
You may verify this electronic certificate
online at <http://www.nvsos.gov/>