(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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TILLED

12 DEC 31 AM 8: 33

SECNELARY OF STATE

412-60596

1/2 B/O

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Unforgettable, Inc	•
	oration - must include suffix
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this	matter to the following:
Jared Kopf	
Na	me of Person
Unforgettable, Inc.	
	m/Company
16169 Poppyseed Circle a	#606
	Address
Del Ray Beach, FL 33484	4
City/	State and Zip code
jaredk@gmail.com	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	please call:
Jared Kopf at 4	15 305-2627 Area Code & Daytime Telephone Number
Name of Person	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 State	



December 5, 2012

JARED KOPF 16169 POPPYSEED CIR #606 DEL RAY BEACH, FL 33484

SUBJECT: UNFORGETTABLE INC. Ref. Number: W12000060596

We have received your document for UNFORGETTABLE INC. and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return 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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 512A00028902

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.	Unforgett	able 🔼 Inc.					_		
		poration; must include "INCORPORATE p," "Inc," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATION,"	 .	/ A	-		
	Un1	tgettable Inc.					_		
	(If name unavailab	le falFlorida, enter alternate corporate na	me	adopted for the purpose of transacting busing	ess in Flo	orida)			
2.	Delaware		3.	80-0774042			_		
	(State or country ur	nder the law of which it is incorporated)	•	(FEI number, if applicable)			_		
4.	12/30/20	11	5.	Perpetual					
	(Date o	f incorporation)		(Duration: Year corp. will cease to exist	or "perpe	tual")	-		
б.							_		
				n Florida, if prior to registration)					
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 16169 Poppyseed Circle #606, Del Ray Beach, FL 33484									
7.	10109 FU				+04		_		
(Principal office address)									
16169 Poppyseed Circle #606, Del Ray Beach, FL 33484									
(Current mailing address)									
8.	Software	and services			SEC:	12 DI	_		
	(Purpose(s)	of corporation authorized in home state o	T CO	ountry to be carried out in state of Florida)	全点	Ċ	1 3		
9.	Name and street	address of Florida registered agent:	(P.0	D. Box NOT acceptable)	SSE	Ψ.	Non-lettuer L N		
	Name:	Jared Kopf			m <u>c</u>				
0	Office Address:	16169 Poppyseed Circle	#6	606	STATE	ფ. 3 3	Ar		
		Del Ray Beach		, Florida 33484	* -'''				
		(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: Jared Kopf 16169 Poppyseed Circle #606, Del Ray Beach, FL 33484 Vice Chairman: Not appointed to date Address: Director: Not appointed to date Not appointed to date **B. OFFICERS** President: Jared Kopf Address: 16169 Poppyseed Circle #606, Del Ray Beach, FL 33484 Vice President: Not appointed to date Address: ____ Secretary: Jared Kopf Address: 16169 Poppyseed Circle #606, Del Ray Beach, FL 33484 Treasurer: Jared Kopf 16169 Poppyseed Circle #606, Del Ray Beach, FL 33484 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 Jared Kopf, President

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "UNFORGETTABLE, 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 TWENTIETH DAY OF

NOVEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID
"UNFORGETTABLE, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF
DECEMber, A.D. 2011.

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

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

12 DEC 31 AM 8: 33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5088803 8300

121251233

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 0002987

DATE: 11-20-12

You may verify this certificate online at corp.delaware.gov/authver.shtml