C1300000044956

| (₭€ | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | Idress) | |
| (A.) | ld-co- | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Na | me) |
| · | · | , |
| (Do | ocument Number) | |
| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | <u></u> |
| | | |
| | | |
| | | • |
| | | |
| | | |

Office Use Only



200253651212



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13 NOV 14 AM 8: 14

ACCOUNT NO. : 12000000195

SECRETARY OF STATE

REFERENCE: 884542

7541001 TALLAHASSEE, FLORIDA

AUTHORIZATION : Blance

COST LIMIT : \$ 125.00

ORDER DATE: November 13, 2013

ORDER TIME : 9:08 AM

ORDER NO. : 884542-005

CUSTOMER NO: 7541001

FOREIGN FILINGS

NAME: KIDS FUTURE INC.

XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

COVER LETTER

| TO: | New Filing Section Division of Corp | | | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------|-----------------------------|--------------------------------------------------------------------|
| SUBJ | KIDS FUTUR | RE INC. | • | | |
| SOD | JEC1 | Name of Corporat | ion – must | include suffix | |
| Dear S | Sir or Madam: | • | | | |
| Affair | s in Florida", "Certif | by Foreign Not for Proficate of Existence", or "ed not for profit corpora | Certificate | of Status" and ch | neck are submitted to |
| Please | return all correspon | dence concerning this m | natter to the | following: | |
| | Elisabeth (| Gonzalez | | | |
| | | Name | of Person | | |
| | Kids Futur | e Inc. | | | |
| | | Firm/0 | Company | | |
| | | | | | |
| | 6538 Collins Avenue, No. 288 Address | | | | |
| | | | | | |
| | Miami Bea | ch, Florida 33141 | | | |
| | | City/State | and Zip Co | de | |
| | elisabeth@ | servicewing.com . | | | |
| | E-mail | address: (to be used for | future ann | ual report notific | ation) |
| For fu | rther information co | ncerning this matter, plea | ase call: | | |
| Elisal | beth Gonzalez | at : | 772 | 202-8682 | |
| | Name of P | | | de & Daytime Te | lephone Number |
| MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 | | • | New Filing Se | | |
| | | Division of Corporations Clifton Building | | | |
| | Tallahassee, FL 32314 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 | | ve Center Circle | | |
| Enclos | sed is a check for the | following amount: | | | |
| □ \$ 70 | 0.00 Filing Fee C | 1\$78.75 Filing Fee & Certificate of Status | | 5 Filing Fee & fied Copy | ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

| 1. KIDS FUTU | | | |
|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------|
| in the name at p | oration: must include the word "INCORPORATE tage as will clearly indicate that it is a corporation present, "Company" or "Co." may not be used as a | instead of a natural person or partnershi | p if not so contained |
| 2. DELAWARE | = 3 | | |
| (State or cou | intry under the law of which it is incorporated) | (FEI number, if applicable | e) |
| 4. October 14, | 2013 | Perpetual | |
| (1 | 2013 5. Date of Incorporation) | (Duration: Year corp. will cease to exi | st or "perpetual") |
| 6. | | | |
| (Date first conc | ducted affairs in Florida if prior to registration. See s | ections 617.1501 & 617.1502, F.S. to det | ermine penalty liability.) |
| | Avenue, #288, Míami Beach, Florida 33141 | | |
| ·· | · (Principal of | fice address) | |
| 6538 Collins | : Avenue, #288, Miami Beach, Florida 33141 | | |
| | | ailing address) | |
| | · | • | |
| Any lawful bu | usiness activity under the laws of this State a | nd the State of Delaware | |
| (Purpose(s) of | corporation authorized in home state or country to | o be carried out in the state of Florida) | |
| O Nome and at | t addman of Planida na sisterad a saute (P.O. | Day NOT against his | |
| 9. Name and <u>su</u> | reet address of Florida registered agent: (P.O | . Box NOT acceptable) | 一0 古 |
| Name: | Corporation Service Company | | 2000 100 100 100 100 100 100 100 100 100 |
| Office Address: | 1201 Hays Street | _ | I I I |
| | Tallahassee | , Florida 32301 (Zip Code) | NOV 14 M 8: 14 ALLANASSEE, FLORIDA |
| | (City) | (Zip Code) | - 1955 o p |
| 10 D 14 | | | OP I |
| 10. Registere c Having heen na | d agent's acceptance: amed as registered agent and to accept servi | ice of process for the above stated co | ornoration at the place |
| designated in th further agree to | his application, I hereby accept the appoints of comply with the provisions of all statutes referred that with and accept the obligations of the control of | nent as registered ugent and agree to selative to the proper and complete to | o act in this capacity. |
| | Corporation Service Company | | |
| | Corporation Service Company | Sue G. Knight | |
| | Bx. Jue Knoth | Assistant Vice President | t |
| | (Registered a | gent'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.

| 17 | Nomec | and address | ses of officer | e and/or | directors |
|----|-----------|------------------------------------------|----------------|----------|-----------|
| 14 | . ivalues | 2411111 34111111111111111111111111111111 | ses of officer | s anavar | auterous |

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| A. DIRECTORS | | NOV | 14 | AM | 8: | 13 |
|----------------------------------------------------------------------------------------------|----------------------------------------|---------|-------------|-------------|----|----|
| Chairman Elisabeth Gonzalez | | | | | • | • |
| Address 6538 Collins Avenue, #288 | | RET, | | | | |
| Miamı Beach, Florida 33141 | | | | - | | •• |
| Vice Chairman: | | | | - | | |
| Address: | | | | | | |
| Director, Michael Kurgan | | | | _ | | |
| Address: 6536 Collins Avenue, #288 | | | | | | |
| Miamì Beach, Fiorida 33141 | | | | | | |
| Director: Annabel Sandoval | | ····· | | _ | | |
| Address: 6538 Collins Avenue, #288 | | | | _ | | |
| Miami Beach, Florida 33141 | ······································ | | | | | |
| B. OFFICERS | | | | | | |
| President: Elisabeth Gonzalez | | | | ••• | | |
| Address: 6538 Collins Avenue, #288 | | | | | | |
| Miami Beach, Florida 33141 | | | | | | |
| Vice President: | | | | ••• | | |
| Address: | | | · · | - | | |
| <u> </u> | | | | _ | | |
| Secretary: Elisabeth Gonzalez | | | | - | | |
| Address: 6538 Collins Avenue, #288, Miami Beach, Florida 33141 | | | | - | | |
| reasurer:Lisa Morse | | | | _ | | |
| Address: 6538 Collins Avenue, #288, Miami Beach, Florida 33141 | | | | | | |
| OTE: If necessary, you may attach an addendum to the application listing additional officers | and/or | directo | ors. | | | |
| 3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap | plication | n) | | | | |
| Elisabeth Gonzalez, President | | | | | | |
| (Typed or printed name and capacity of person signing application) | | | | | | |



The First State

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13 NOV 14 AM 8: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "KIDS FUTURE 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 FOURTEENTH DAY OF
NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

5414684 8300C

131307418

AUTHENTACATION: 0894962

DATE: 11-14-13

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