

F130000005560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

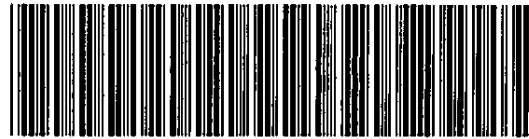
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TALLAHASSEE FLORIDA

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~~W130000068715~~



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 17, 2013

TAYLOR BAKKEN  
POST OFFICE BOX 52110  
MINNEAPOLIS, MN 55402

SUBJECT: 701 VENTURES, INC.  
Ref. Number: W13000068715

We have received your document for 701 VENTURES, 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):

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.

The entity's date of incorporation/organization must be listed in the document.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 013A00028581

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** 701 VENTURES, INC.

Name of corporation - must include suffix

RECEIVED  
13 DEC 26 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

TAYLOR BAKKEN

Name of Person

701 VENTURES, INC.

Firm/Company

PO BOX 52110

Address

MINNEAPOLIS, MN 55402

City/State and Zip code

TAYLOR@FIRST-AVENUE.COM

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

For further information concerning this matter, please call:

TAYLOR BAKKEN

Name of Person

at ( 651 ) 402-3866

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

**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. **701 VENTURES, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**701 FIRST AVENUE, INC.**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **MINNESOTA**

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

3. **N/A**

(FEI number, if applicable)

4. **2004**

(Date of incorporation)

5. **PERPETUAL**

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

6. **01/01/2013**

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

7. **701 N. 1ST AVE. MINNEAPOLIS, MN 55403**

(Principal office address)

**PO BOX 52110 MINNEAPOLIS, MN 55402**

(Current mailing address)

8. **EMPLOYMENT PURPOSES / NIGHT CLUB**

(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:

**BYRON FRANK**

Office Address:

**3001 W. GULF DRIVE #1**

**SANIBEL**

(City)

, Florida

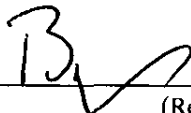
**33957**

(Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: BYRON FRANK

Address: 3001 W. GULF DRIVE UNIT 1  
SANIBEL, FL 33957

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: BYRON FRANK

Address: 3001 W. GULF DRIVE UNIT 1  
SANIBEL, FL 33957

Vice President: DAYNA FRANK

Address: 516 N. MANSFIELD AVE  
LOS ANGELES, CA 90036

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: NATE KRANZ

Address: PO BOX 52110 MINNEAPOLIS, MN 55402

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

13. 

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. Byron Frank, Chairman

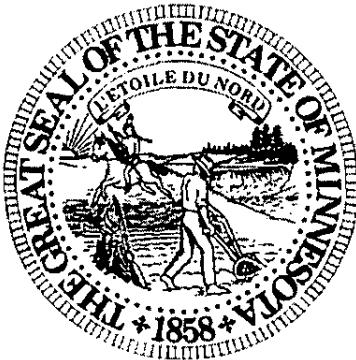
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: 701 Ventures, Inc.  
Date Filed: 10/08/2004  
File Number: 1069812-2  
Minnesota Statutes, Chapter: 302A  
Home Jurisdiction: Minnesota

This certificate has been issued on: 12/06/2013



*Mark Ritchie*

Mark Ritchie  
Secretary of State  
State of Minnesota