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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Flourish Commercial Cap Name of corporation - must in	ortal, Inc.				
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation for Authoriza "Certificate of Existence," or "Certificate of Good Standing" and above referenced foreign corporation to transact business in Flor	d check are submitted to register the				
Please return all correspondence concerning this matter to the following. Jackson	llowing:				
Name of Person					
Flourish Commercial Capital, Firm/Company	Inc.				
Firm/Company					
5500 Military Trail, # 22-138					
Address					
Jupiter FL 33458 City/State and Zip co					
City/State and Zip co	de				
Into @ Flourish Commercial Capital. Com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future	annual report notification)				
For further information concerning this matter, please call:					
Kina W. Jackson at (317) 40 Name of Person Area Code & D	88289 = WE				
Name of Person Area Code & Daytime Telephone Number					
	313 13				
	$\mathbf{\omega}$				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
New Filing Section	New Filing Section & Sign				
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, FL 32314				
Tallahassee, FL 32301	C)				
Enclosed is a check for the following amount:					
	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. Flourish Commercial Capital 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. 46-4580341

(FEI number, if applicable) 4. 1-15-14

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 5500 Military Trail, Suite 22-138, Juriter, FL 33458
(Principal office address) 8. <u>General Management Coinsulting Services</u>
(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: 5500 Military Trail, suite 22-138

Supiter , Florida 33458
(Zip code) Office Address: 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

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

SECRETARY OF STATE DIVISION OF CORPORATIONS
, AREA KAHONG

A. DIRECTORS	14 FEB 13 PM 3: 17
Chairman: V/A	25 10 111 3: 17
Address:	
Vice Chairman:	
Address:	
Director: Kina W. Jackson	
Address: 5500 Military Trail, suite 22-138	
Address: 5500 Military Trail, suite 22-138 Jupiter FL 33458	
Director:	
Address:	
B. OFFICERS	
President: John Jackson	
Address: 5500 Military Trail Suite 22-138	
President: John Jackson Address: 5500 Military Trail, Suite 22-138 Tupiter FL 33458	
Vice President:	
Address:	
Address.	
Secretary: Kina W. Jackson	A 10 To 10 T
Secretary: Kina W. Jackson Address: 5500 Military Trail suite 22-138, Ju Treasurer: John Jackson	10,745 FC33458
Treasurer John Jackson	
Address: 5500 Military Trail, suite 22-138,	Tueiter FC 33458
NOTE: If necessary, you may attach an addendum to the application listing additi	onal officers and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above are true and that he or she is aware that false information submitted in a document (
third degree felony as provided for in s.817.155, F.S.	•
14 John Jackson Tregsurer	

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

SECRETARY OF STATE SECRET



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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, FLOURISH COMMERCIAL CAPITAL, 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 January 15, 2014, and is in good standing in this state.

NEVADA POR PORTO DE CONTRA DE CONTRA

Electronic Certificate
Certificate Number: C20140205-2864
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 5, 2014.

ROSS MILLER Secretary of State