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

Office Use Only

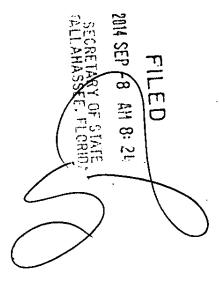


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BURSION OF CORPORATION

RECEIVED



DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

. .

Account Number	FCA00000017
Date:	9-8-14
Requestor Name:	Carlton Fields Jorden Burt, P.A.
Address:	Post Office Drawer 190 Tallahassee, Florida 32302
Telephone:	(850) 513-3619 - direct (850) 224-1585
Contact Name:	Kim Pullen, CP, FRP
Corporation Name:	Easton Development Inc.
Email Address:	
Entity Number:	1
Authorization:	Kim Pullen
X Acticles Certified Copy	Certificate of Status
New Filings	Plain Stamped Copy Annual Report
Fictitious Name	Amendments Registration
X)Call When Ready	(X) Call if Problem () After 4:30
X)Walk In	() Will Wait (X) Pick Up

CF Internal Use Only
Client: 05237 Matter: 05208
Name L. Redding Office: TPA

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4)4

DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

Account Number	FCA00000017	
Date:	9-8-14	
Requestor Name:	Carlton Fields Jorden Burt, P.A.	
Address:	Post Office Drawer 190 Tallahassee, Florida 32302	
Telephone:	(850) 513-3619 - direct (850) 224-1585	
Contact Name:	Kim Pullen, CP, FRP	
Corporation Name:	Easton Devel	opment Inc.
Email Address:	·	
Entity Number:	1	
Authorization:	Kim Pull	n
X Acticles Certified Copy		Certificate of Status
New Filings	Plain Stamped Copy	Annual Report
Fictitious Name	Amendments	Registration
(X)Call When Ready	(X)Call if Problem	() After 4:30
(X) Walk In	() Will Wait	(X) Pick Up
		•

CF Internal Use Only
Client: 05 2.37

Matter: 05208

NameL. Redding

Office: TPA

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.} Easton D	evelopment Inc.								•						
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,"	, "COM	MPAN	Y," "C	ORPC	RAT	ION,"							
Easton D	evelopment (Delaware)	In	C.												
(If name unavaila	able in Florida, enter alternate corporate nar	ne a	adopted	d for th	ne purpo	se of	transa	cting busi	ness in F	lorida	1)				
_{2.} Delaware		3.	46-	239	6454	4									
	y under the law of which it is incorporated)				(FE	El nun	ber, i	f applicab	le)						
_{4.} 2/27/2013	3	5.	Per	rpet	ual										
	of incorporation)	٠.				rp. wi	l ceas	e to exist	or "perp	etual")				
6.															
	(Date first transacted busines							1.32.							
700 Ponte	(SEE SECTIONS 607.1501 & 607 Vedra Lakes Blvd., Por					•	•	• ,	2						
7. 100 1 One	(Principal office a			ura	Dea	CH,	<u> </u>	3200							
	•						,								
700 Ponte	Vedra Lakës Blvd." Pon (Current mailing a			dra	Beac	h,	FL	3208	2 <u>:</u> 2	- 2	<u> </u>				
	(Current maning a	auur	ress)						ے ۔۔ حرد	် င	SED .				
8 Name and stree	et address of Florida registered agent: (P C) Roy	NOT	Γaccen	table`			HAS	1 4	ο 1	7			
o. Ivame and siree	CFRA, LLC	1.0	J. DUA	. 110,1	_ассер	table	,		SEE	< -	بة س				
Name:	CFRA, LLC								'.`'⊆ ''T		1				
Office Address:	100 S. Ashley Drive, Suite	e 4	100							일 · (
	Tampa			Flori	_{da} 33	602	<u>)</u>		F	a .	24				
	(City)		··· ,			p coc	le)								
0.10.1.4															

9. 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)

10. 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director: J. Thomas Dodson
Address:
Director:
Address:
B. OFFICERS
President: J. Thomas Dodson
Address: 700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Vice President: Arthur E. Lancaster
Address: 700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Secretary: J. Thomas Dodson
700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Treasurer: J. Thomas Dodson
700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Q Mmas Andon
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.
J. Thomas Dodson

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "EASTON DEVELOPMENT 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 FIFTH DAY OF SEPTEMBER,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EASTON DEVELOPMENT INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2013.

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

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

5295102 8300

141146931

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 1674295

DATE: 09-05-14

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