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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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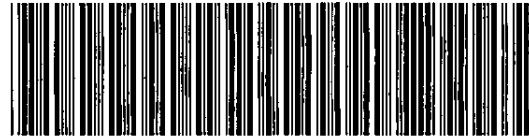
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/26/14--01035--014 **70.00

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14 OCT 14 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W14- 59394

✓ 10/15/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 29, 2014

DIANNE COOPER
5301 ROBIN LANE NO.
ST. PETERSBURG, FL 33714

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

The Cover Letter AND Certificate list "CANON CAPITAL GROUP, INC." - - but the actual application lists "MARLEE PROPERTIES, LLC". Please decide which entity is to be filed.

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 date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 014A00020812

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Canon Capital Group, Inc.
Name of corporation - must include suffix

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:

Dianne Cooper
Name of Person

Firm/Company

5301-Robin Lane North
Address

ST. Petersburg, FL 33714
City/State and Zip code

dian2shop@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dianne Cooper at (727) 709-5979
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 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. Canon Capital Group 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. Aruba 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8-29-14 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 5301 - Robin Lane No. St. Petersburg, FL 33714
(Principal office address)

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Dianne Cooper

Office Address: 5301-Robin Lane No.
St. Petersburg, Florida 33714
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Dianne Cooper
(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: Dianne Cooper

Address: 5301- Robin Lane North
ST. Petersburg, FL 33714

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Dianne Cooper

Address: 5301- Robin Lane No.
ST. Petersburg, FL 33714

Vice President: Dianne Cooper

Address: 5301- Robin Lane No.
ST. Petersburg, FL 33714

Secretary: Dianne Cooper

Address: 5301- Robin Lane No. ST. Petersburg, FL 33714

Treasurer: \$ Dianne Cooper

Address: 5301- Robin Lane No. ST. Petersburg, FL 33714

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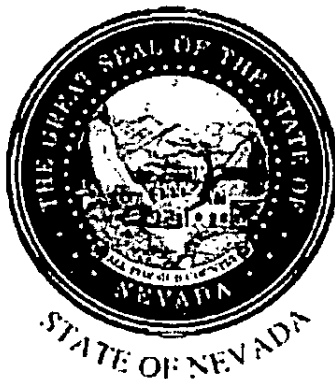
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Dianne Cooper
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.

13. Dianne Cooper / President
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



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CLERK OF THE SECRETARY OF STATE
STATE OF NEVADA

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, **CANON CAPITAL GROUP, 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 August 29, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 17, 2014.



[Signature]
ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20140917-3096
You may verify this electronic certificate
online at <http://www.nvsos.gov/>