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SECRETARY OF STATE OF STATE OF CORPORATIONS

× 03/13/15

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: 2 K Capital Crown, MC. 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:
Kevin Fulcher Name of Person
Name of Person
2 K Capital Grand, Inc
1418 John Ringling PKWy
Sarasota, fr. 34234
City/State and Zip code
Kevin @ Cash deal pri pertry com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nambof 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 \$\Bigcup \\$78.75 Filing Fee & Certificate of Status \$\Bigcup \\$78.75 Filing Fee & Certified Copy \$\Bigcup \\$78.75 Filing Fee & 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		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	-	
2. Notada (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. February 5, 305 (Date of incorporation) 5. percetual (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. 1418 John Kingling Parkway Sarasotte, Fr. 34236 (Principal office address)		
1418 John Lingling Parking Javasota Fo 34236 (Current mailing address)		
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	15 MAR	SECRE
Name: Kimberly Deme- Fulcher	_	무유
	<u> </u>	
Office Address: 1418 John Lingling Pkwy Sarasta, Florida 3-1236	AM 10:	S 18
(City) (Zip code)	58	200
9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this cafurther agree to comply with the provisions of all statutes relative to the proper and complete performance of duties, and I am familiar with and accept the obligations of my position as registered agent.	pacii	ace ty. I

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: Kelin Vice Chairman: Address: ____ Director: Kimberly Deme-Fulcher Director: Address: __ **B. OFFICERS** Vice President: Address: __ Treasurer: 401 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Kimberly

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

SECRETARY OF STATE



SECRETARY OF STAIL DIVISION OF CORPORATION: 15 MAR | 1 AM 10: 58

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, **2K 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 February 5, 2015, and is in good standing in this state.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 6, 2015.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150306-1581
You may verify this electronic certificate
online at http://www.nvsos.gov/