

## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: LICENSES ETC INC

Account Number : I20070000159

Phone

: (239)777-1028

Fax Number : (877)275-3593

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

ETC@LicensesEtc.com

## FOREIGN PROFIT/NONPROFIT CORPORATION Lions Gate Development, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Lions Gate Developmen	nt, Inc.
	ı - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Statabove referenced foreign corporation to transact business."	nding" and check are submitted to register the
Please return all correspondence concerning this matte	r to the following:
Sean Dinneen	
Name of	Person
Licenses, Etc., Inc.	
Firm/Con	npany
886 110th Ave. N, Suite 6	
Addr	ess
Naples, FL	
City/State a	and Zip code
34108	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	
Sean Dinneen at 239	
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:  \$\sim\$ \$70.00 Filing Fee \$\sim\$ Certificate of Status	\$78.75 Filing Fee & Ser.50 Filing Fee, Certified Copy Certified Copy Certified Copy

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# 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.

	te Development, Inc. orporation; must include "INCORPORATED	" "COMPANY," "CORPORATION	<b>V,"</b>
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp ")	,	,
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	ng business in Florida)
Oklahom		48-7171107	
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap	oplicable)
02/20/20	07	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
		in Florida, if prior to registration) 502, F.S., to determine penalty liabili	ity)
110 NE 4	5th Court, Fort Lauderdale	e, FL 33334	
	(Principal office add	dress)	
204 E. Ma	in Street, Ada, OK 74820	,	
	(Current mailing add	tress)	हिंदी क
Name and stree	et address of Florida registered agent: (P.	O Roy NOT accentable)	年 ○ 2-3 ×
	Louis J Tkacz	O. Do. 1401 acceptable)	3 3 D
Name:			ARC IN LE
fice Address:	410 NE 45th Court		
	Fort Lauderdale	, Florida 33334	
	(City)	(Zip code)	5m £
ving been nam ignated in this ther agree to c	ent's acceptance: led as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes familiar with and accept the obligations	ment as registered agent and agr relative to the proper and comple	ree to act in this capacity. ete performance of my
	Power	THE	
_	(Right diagon's	signatur	

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:	FILED
A. DIRECTORS	15 APR 16 PM 12: 4
Chairman:	SECRETARY OF CTAPE
Address:	TALLAMASSEE, FLORID,
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS  President: Woods, Dawn	
Address: RR5, box 550 Coalgate, OK 74538	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing ac	ditional officers and/or directors.
12. Dawn Wards of Director or Officer	
The officer or director signing this document (and who is listed in number 12 a are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	bove) affirms that the facts stated herein
13. Dawn Woods	

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#### OFFICE OF THE SECRETARY OF STATE



### CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>LIONS GATE DEVELOPMENT</u>, <u>INC.</u> whose registered agent is <u>DAWN WOODS</u>, with its registered office at <u>RT 5 BOX 580 COALGATE 74538</u>. USA Oklahoma is a <u>Domestic For Profit Business Corporation</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 14th, day of Jamary, 2015.

Secretary Of State

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