(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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## **COVER LETTER**

TO: New Filing Section Division of Corporations				
LAUNCH PROPERTY OR OLD INC				
SUBJECT: LAUNCH PROPERTY 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:				
Brooks Turton				
Name of Person				
Firm/Company				
679 Westyn Bay Blvd				
Address Address				
Ocoee FL 34761				
City/State and Zip code				
brooks.turton@gmail.com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Brooks Turton (407) 765-6661				
Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section				
Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314				
Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy				

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE REGISTER A FOR	E WITH SECTION 607,1503, FLORIDA REIGN CORPORATION TO TRANSACT	STATUTES, THE FOLLOWING IS SU T BUSINESS IN THE STATE OF FLOR	AUDA.
, LAUNCH PROPERTY GROUP, INC			HAS
(Enter name of c	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")		STE - 108
(If name unavaila	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting bu	
<sub>2.</sub> Nevada		3.	•
(State or country under the law of which it is incorporated)		(FEI number, if applications)	able)
<sub>4.</sub> 3/31/201	5	<sub>s.</sub> Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exi-	st or "perpetual")
6			
		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	
- 679 West	yn Bay Blvd Ocoee FL 34		
7.0.0 11001	(Principal office ac	<del> </del>	
	•		
<del></del>	(Current mailing ac	ddress)	
8. Name and street	<u>et address</u> of Florida registered agent: (F	P.O. Box <u>NOT acceptable</u> )	
Name:	Business Filings Incorpora	ated	
Office Address:	1200 S Pine Island Rd		
	Plantation	. Florida 33324	
	(City)	(Zip code)	
9. Registered age	ent'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.

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: N/A Vice Chairman: N/A Address: Director: Brooks Turton Address: 679 Westyn Bay Blvd Ocoee FL 34761 B. OFFICERS President: Brooks Turton Address: 679 Westyn Bay Blvd Ocoee FL 34761 Vice President: N/A Address: \_\_\_ Secretary: Jaclyn Turton Address: 679 Westyn Bay Blvd Ocoee FL 34761 Treasurer: Jaclyn Turton Address: 679 Westyn Bay Blvd Ocoee FL 34761 NOTE: If pecessary, 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. 13. Brooks Turton, President

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

SECRETARY OF STATE



15 MAY 20 PH IZ: 44

The Affactors of Staffa

# 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, LAUNCH PROPERTY 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 March 31, 2015, and is in good standing in this state.

SEAL OF THE SEAL O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 10, 2015.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150410-0768
You may verify this electronic certificate
online at http://www.nvsos.gov/