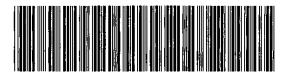
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(Requestor's Name)
(Address)
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,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL W15-58546
(Business Entity Name)
(Document Number)
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OCT 20 2015 N. CAUSSEAUX

COVER LETTER

TO: Registration Section Division of Corporations			
ROOKIEPRO INC.			
SUBJECT:Nan	ne of corporation	on - must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence," or "Certificator to referenced foreign corporation to the second secon	ate of Good St	anding" and check are su	
Please return all correspondence conce QUOC D TRAN	erning this matt	er to the following:	
	Name o	f Person	
ROOKIEPRO INC.			
4207 S DALE MABRY HWY UNIT 411	Firm/Co	ompany	
	Ado	iress	
TAMPA FL 33611			
	City/State	and Zip code	
INFO@ROOKJEPRO.COM			
E-mail add	ress: (to be use	d for future annual report	notification)
For further information concerning thi	s matter, pleas	e call:	
QUOC D TRAN	727	252-6712	
Name of Person	at (Area Co	ode Daytime Tele	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following a \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



September 3, 2015

QUOC D TRAN ROOKIEPRO INC. 4207 S. DALE MABRY HWY., UNIT 4110 TAMPA, FL 33611

SUBJECT: ROOKIEPRO INC. Ref. Number: W15000058540

We have received your document for ROOKIEPRO INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 015A00018691

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 ROOKIEPRO INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) DELAWARE 47-4755439 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 4207 S DALE MABRY HWY UNIT 4110, TAMPA FL 33611 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) QUOC D TRAN Name: 4207 S DALE MABRY HWY UNIT 4110 Office Address: **TAMPA** , Florida (City) 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.

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:

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	Quoc Tran - CEO	SSE
nt: _ 4	207 S Dale Mabry Hwy #4110, Tampa, FL 33611	TO E
		IDE #
esid	Lom V Nguyen - COO	
	950 34th Street N, St. Petersburg, FL 33713	***************************************
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	necessary, you may attach an addendy to the application listing additional offic	cers and/or directors.
	Signature of Director or Officer	
e an	or director signing this document (and who is listed in number 11 above) affirms that he or she is aware that false information submitted in a document to the Deree felony as provided for in s.817.155, F.S.	

Delaware

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ROOKIEPRO 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 SIXTEENTH DAY OF SEPTEMBER, A.D. 2015.



5800383 8300 SR# 20150174045

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

Authentication: 10244281

Date: 09-16-15