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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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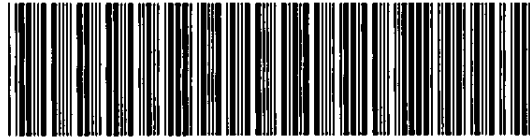
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 13 2015
BRUCE

November 5, 2015



Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Nika's Village, Inc. - Application by Foreign Corporation for Authorization to Conduct its Affairs in Florida

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Conduct its Affairs in Florida," "Certificate of Existence" and check in the amount of are submitted to register the above reference non for profit corporation to conduct its affairs in Florida.

The enclosed "Certificate of Existence" may appear to be a photocopy, but it is not. The Indiana Secretary of State does not issue original paper certificates. Certificates of Existence downloaded from the Secretary of State's website are the only certificates available.

Please return all correspondence concerning this matter to the following:

John C. Gilliland II
Gilliland, Maguire & Harper, PC
10293 North Meridian Street, Suite 300
Indianapolis, Indiana 46290

Email Address: jgilliland@gillilandlawfirm.com

For further information concerning this matter, please call:

John C. Gilliland II at (317) 704-2400.

Enclosed is a check in the amount of \$78.75 for the filing fee and Certificate of Status.

Thank you for your assistance.

Very truly yours,

GILLILAND, MAGUIRE & HARPER, P.C.

John C. Gilliland II
Admitted in IN, KY and OH

Enclosures

JCG/ts

cc: Mandisa Pawelczak, President
Nika's Village, Inc.

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TALLAHASSEE, FLORIDA

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Nika's Village, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Indiana 3. 47-5105781
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 28, 2015 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. Has not yet conducted business in Florida
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 7139 Pluto Drive, Indianapolis, Indiana 46241
(Principal office address)

(Current mailing address, if different)

8. See Addendum #1
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Felicia Owens

Office Address: 2124 Willesdon Drive E
Jacksonville, Florida 32246
(City) (Zip Code)

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10. 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.

Felicia Owens

(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Mandisa Pawelczak

Address: 7139 Pluto Drive

Indianapolis, Indiana 46241

Vice Chairman: Michael Pawelczak

Address: 7139 Pluto Drive

Indianapolis, Indiana 46241

Director: Felicia Owens

Address: 2124 Willesdon Drive E

Jacksonville, Florida 32246

Director: _____

Address: _____

B. OFFICERS

President: Mandisa Pawelczak

Address: 7139 Pluto Drive

Indianapolis, Indiana 46241

Vice President: Michael Pawelczak

Address: 7139 Pluto Drive

Indianapolis, Indiana 46241

Secretary: Felicia Owens

Address: 2124 Willesdon Drive E, Jacksonville, Florida 32246

Treasurer: Mandisa Pawelczak

Address: 7139 Pluto Drive, Indianapolis, Indiana 46241

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

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mandisa Pawelczak, President

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

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TALLAHASSEE, FLORIDA

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greetings:

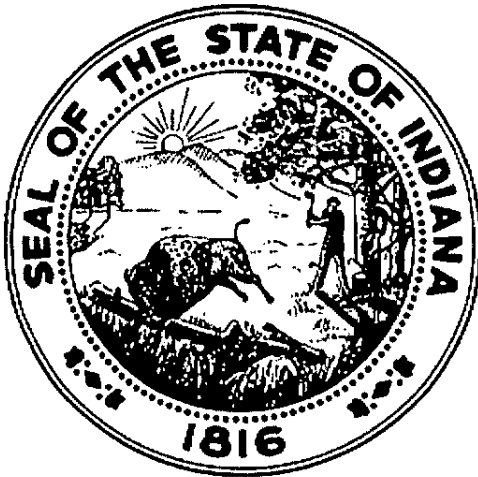
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

NIKAS VILLAGE INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 28, 2015, and was in existence or authorized to transact business in the State of Indiana on November 05, 2015.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fifth Day of November, 2015.

Connie Lawson

Connie Lawson, Secretary of State

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