F15000005729

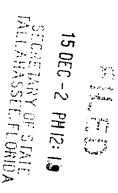
(Re	equestor's Name)	
(Ad	ldress)	
(Δα	ldress)	
(^0	uicss)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(- ·		,
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Eiling Officer	
Special instructions to	Filing Officer.	

Office Use Only



600277582386

11/03/15--01029--016 **70.00



DEC 0 3 2015 J SHIVERS



November 10, 2015

CASEY FABIANSKI 5631 SPANISH POINT CT PALMETTO, FL 34221

SUBJECT: CASEY FABIANSKI DESIGNS

Ref. Number: W15000074124

We have received your document for CASEY FABIANSKI DESIGNS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 515A00023793

COVER LETTER

TO: Registration Section Division of Corporations
15 DECLEAR LALL
SUBJECT: 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:
CASEY FABIANSKI
Name of Person
CF DESIGNS INC.
Firm/Company
5631 SPANISH POINT CT
Address
PALMETTO, FL 34221
City/State and Zip code
info@cf-designs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lasey Fahianski 815 485-5703
Name of Person at (815) 685-5703 Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration 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 \$\Bigcup \text{\$78.75 Filing Fee & Certificate of Status}\$\$ \Bigcup \text{\$78.75 Filing Fee & Certified Copy}\$\$\$ Certified Copy\$\$ Certified Copy\$\$\$ Certified Copy\$\$ Certified Copy\$\$\$ Certified

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.	CF DE	ES16NS	MCOF	PORATE	=D					
		f corporation; mus "Corp," "Inc," "Co			"COMPANY,	" "CORPO	RATION,"			
		corp, mo, co	, or corp.	,						
	CASEY	/ FABIA	VSKI	DESIGNS	: INC	RPOP	ZATE	D		
	(If name unav	ailable in Florida, e	enter alternate	-		-	ransacting b	usiness in	Florida	a)
2.	11			incorporated) 3.	~//	4				
	(State or cou	ntry under the law	of which it is	incorporated)		(FEI numl	per, if applic	cable)		
4.	10	5/2012		5.	Per	petr.	al			
	(D	ate of incorporation	n)		(Date	of duration,	if other tha	n perpetu	al)	
6.		NA	- No	business	transac	cted y	iet.			
		(SEE S	SECTIONS 6	sacted business in 07,1501 & 607,15	02, F.S., to dete	ermine penal	lty liability)			
7	941	WILDWOO	D DR	NEW	LENOX	,14	604	51		
				(Princip	al office address	s)				
	5631	SPANISH	1 Po	INT COL	RT F	ACM	ETTO	, FL	34	22
				(Current mailin	g address, if dif	Terent)		Zω		
8.	Name and st	reet address of F	lorida registe	ered agent: (P.C). Box <u>NOT</u> a	cceptable)		EGET	15 DEC	
	Name:							SSE!	$\frac{1}{2}$	Andreas
Of	fice Address:	5631 5	spanish	Pt. Ct.				OF STATE	PH 12: 1,	Agenties A 1.
		Palme	f to		, Florida	3422	21			كأرسوه
			(City))		(Zip code	e)	>		

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.

(Registered agent's signature)

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: ~/A
Address: ~/A
Vice Chairman: NA
Address: N/A
Director: NA
Address: V/A
Director: \mathcal{N}/\mathcal{A}
Address: \mathcal{N}/\mathcal{A}
Audiess.
B. OFFICERS
President: Casey Fabranski Address: 5631 Spanish Pt. Ct Palmetto, FL 34221
Address: $\frac{3037}{9000000000000000000000000000000000000$
Vice President:
Address: NA
Secretary: N/A or Same as above
Address: NA
Treasurer: N/A or Same as above
Address: \mathcal{N}/\mathcal{A}
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Insufferde.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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.

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



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

CF DESIGNS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 05, 2012, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 4TH day of NOVEMBER A.D. 2015 .

Authentication #: 1530801970 verifiable until 11/04/2016 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE