# F/6000000899

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL MAIL			
(Bu	siness Entity Nar	ne)			
(Do	ocument Number)				
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
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Office Use Only

K.SALY EXAMINER FEB 29

# **COVER LETTER**

	istration Section ision of Corporation	ons			
SUBJECT	. Kannico Consulti	ing Corp.			
SUBJECT	•		corporation ·	· must include suffix	
Dear Sir or	Madam:				
"Certificate		'Certificate of	Good Stand	ling" and check are sub	ct Business in Florida," mitted to register the
Please retur	n all corresponden	ce concerning	this matter	to the following:	
Kirsten Stev	ens				
			Name of P	erson	
Kannico Cor	sulting Corp.				
			Firm/Comp	pany	
1730 S. Fede	ral Hwy. #309				
			Addres	SS	
Delray Beac	ı, FI 33483				
		(	City/State an	d Zip code	
kstevens@ka					
	E-m	nail address: (1	to be used for	or future annual report r	notification)
For further	nformation concer	ning this matt	er, please ca	il:	
Kirsten Stevens at (828		(828	279-7712		
Na	me of Person	<b></b>	Area Code	Daytime Telep	hone 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 follow	lowing amoun	ıt:		
<b>\$</b> 70.00 E		78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

# 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.

(If name unavaila North Carolina	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting 46-3746203	business in Florida)
	y under the law of which it is incorporated)	(FEI number, if app	licable)
September 30, 2	. ,		·
	of incorporation)	(Date of duration, if other t	han perpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		y)
100 Linton Blvd.	Suite 112B, Delray Beach, FL 33483		
	(Principa	al office address)	
1730 S. Federal I	Iwy. #309, Delray Beach, FL 33483		
	(Current mailing	g address, if different)	2016 FEB
Name and stree	t address of Florida registered agent: (P.O	. Box NOT acceptable)	多数 <b>3</b> 1
Name:	Kirsten Stevens		TO R
fice Address:	100 Linton Blvd. Suite 112B		چې چې
	Delray Beach	, Florida <u>33483</u>	10 E
	(City)	(Zip code)	

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. Nam	es and business addresses of o	fficers and/or directo	rs:	n <sup>pr</sup> alient
A. DIR	ECTORS			2016 FED 25 PH 3: 40
Chairman	Kirsten Stevens			2016 FFM 2=
Address:	1730 S. Federal Hwy. #309			Action 19 3: 40
	Delray Beach, FL 33483			ALLAHASSEE, EL STATE
Vice Chai	irman:			1,7,4
Address:	· · · · · · · · · · · · · · · · · · ·			
,				
Director:				
Address:	•			
Director:				- <del>1111   11   11   11   11   11   11   </del>
Address:				
B. OFF	ICERS			
President:	Kirsten Stevens	<u> </u>		
Address:	1730 S. Federal Hwy. #309			
	Delray Beach, FL 33483			
Vice Pres	ident:			
Address:			.,	
Secretary				
Address:				
Treasurer				
Address:				
	If necessary, you may attach a			officers and/or directors.
12		Keyteno	toreus	
are true a		false information subs.817,155, F.S.	ed in number 11 above) af mitted in a document to th	firms that the facts stated herein e Department of State constitutes
13		Kursten	Stevens - Da	resident

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



# NORTH CAROLINA Department of the Secretary of State

## **CERTIFICATE OF EXISTENCE**

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### KANNICO CONSULTING CORP.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 30th day of September, 2013, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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DEPARTMENT OF THE PARTMENT OF



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of February, 2016.

Elaine I. Marshall

**Secretary of State**