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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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COVER LETTER

TO: Registration Section Division of Corporations			
GEORGE PEDDLERS MALL, SUBJECT:	INC.		
	corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to transport to the component of the corporation of the corporation of the corporation to the corporation to the corporation to the corporation of the corporation to the corporation to the corporation to the corporation of the co	Good Stand	ling" and check are submitte	siness in Florida," ed to register the
Please return all correspondence concerning JOHN N. GEORGE	this matter	to the following:	
747	Name of P	erson	
GEORGE PEDDLERS MALL, INC.			
11371 DECIMAL DRIVE	Firm/Comp	any	
LOUISVILLE, KY 40299	Addres	S	
PMALLI@BELLSOUTH.NET	City/State and	d Zip code	
E-mail address: (to be used fo	r future annual report notifi	cation)
For further information concerning this matt	ter, please ca	11:	
WILLIAM A. DERMODY, CPA	502	426-9660	
Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	n ations
Enclosed is a check for the following amour	nt:		
■ \$70.00 Filing Fee □ \$78.75 Filing Fee Certificate of \$		\$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

GEORGE PE	EDDLERS MALL, INC.	
(Enter name o	l'corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"
(If name unav	ailable in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)
KENTUCKY	,	46-4519226
(State or cou 12/23/2013	ntry under the law of which it is incorporated) 5.	(FEI number, if applicable)
	ate of incorporation)	(Date of duration, if other than perpetual)
·	•	2, F.S., to determine penalty liability)
	1AL DRIVE, LOUISVILLE, KY 40299 (Current mailing	g address, if different)
. Name and <u>st</u>	940 SCOTT DRIVE	. Box <u>NOT</u> acceptable)
Name: Office Address		
Name: Office Address	MARCO ISLAND	34145 , Florida

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: Address: Vice Chairman: _____ Director: Address: **B. OFFICERS** JOHN N. GEORGE President: 940 SCOTT DR., MARCO ISLAND, FL 34145 Address: __ Address: Secretary:

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

Address: _____

12. **X**

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.

JOHN N. GEORGE

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 175795

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

George Peddlers Mall, Inc.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is December 23, 2013 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 26th day of April, 2016, in the 224th year of the Commonwealth.





Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

175795/0874946