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15 JUN 20 AM 11:11

JUN 21 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Falling Colors Technology, Inc.

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:

Mindy Hale

Name of Person
Falling Colors Technology, Inc.
Firm/Company
125 Lincoln Ave, Ste 223
Address
Santa Fe, NM 87501
City/State and Zip code
mindy@fallingcolors.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Mindy Hale	505	250-1084
Name of Person	at (Area Code)	Daytime Telephone 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 amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$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.*

Falling Colors Technology, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. New Mexico 3. 85-0461875
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/3/1999 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 2/1/2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 125 Lincoln Ave, Santa Fe, NM 87501
(Principal office address)

PO Box 2083, Santa Fe, NM 87504
(Current mailing address, if different)


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

Name: Anthony Spencer

Office Address: 529 Goldenmoss Loop
Ocoee, Florida 34761
(City) (Zip code)

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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: NA

Address: _____

Vice Chairman: NA

Address: _____

Director: NA

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Pamela Koster

Address: 125 Lincoln Ave, Ste 223

Santa Fe, NM 87501

Vice President: Mindy Hale

Address: 125 Lincoln Ave, Ste 223

Santa Fe, NM 87501

Secretary: Tracy Archuleta

Address: 125 Lincoln Ave, Ste 223 Santa Fe, NM 87501

Treasurer: Not applicable

Address: Not applicable

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

12.  _____
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.

13. Mindy Hale, Vice President

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

**OFFICE OF THE SECRETARY OF STATE
NEW MEXICO**

Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

**FALLING COLORS TECHNOLOGY , INC.
1994128**

the above named entity, a Corporation incorporated under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Profit Corporation, under the

Business Corporation Act

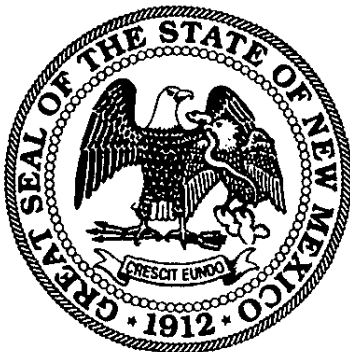
53-11-1 to 53-18-12 NMSA 1978

having filed its Articles of Incorporation on March 3, 1999, and Certificate of Incorporation issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: **May 3, 2016**

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.



A handwritten signature in black ink, appearing to read "Brad Winter".

**Brad Winter
Secretary of State**

Certificate Validation #: 0000021

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the **Certificate Validation** option on the Business Filing System at <https://portal.sos.state.nm.us/bfs/online> and following the instructions displayed under **Certificate Validation**.

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