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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

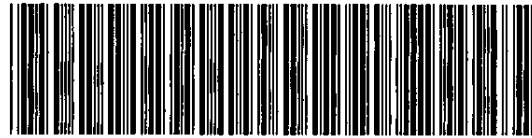
Certified Copies _____

Certificates of Status _____

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W16-43309

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05/20/16--01009--008 **35.00

06/15/16--01022--030 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL 19 A 11:30

FILED

JUL 20 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 15, 2016

LAURIE SENZ, REGISTERED AGENT
2363 DEER CREEK TRAIL
DEERFIELD BEACH, FL 33442

SUBJECT: MONIKI, INC
Ref. Number: W16000043309

We have received your document for MONIKI, INC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 116A00012581

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL 19 A 11: 30

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MONIKL, 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:

LAURIE SENZ, REGISTERED AGENT

Name of Person

MONIKL, INC

Firm/Company

2363 DEER CREEK TRAIL

Address

DEERFIELD BEACH, FL 33442

City/State and Zip code

ZSK54321@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURIE SENZ

Name of Person

at (954) 481-1930

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

16 JUN -8 AM 10:50
FILED
2016 JUL 19 A 11:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
\$ 35 as already sent A check for \$ 35.00 + FL = \$ 70
see Cathy Camothers

**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. MONIKL, INC

(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. DELAWARE

(State or country under the law of which it is incorporated)

3. 81-2501103

(FEI number, if applicable)

4. 4/20/2016

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____

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

7. 2711 CENTERVILLE ROAD, STE 400, WILMINGTON, DE 19808;

(Principal office address)

2363 DEER CREEK TRAIL, DEERFIELD BEACH, FL 33442 (REGISTERED AGENT IN FL)

(Current mailing address, if different)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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

Name: LAURIE SENZ

Office Address: 2363 DEER CREEK TRAIL

DEERFIELD BEACH

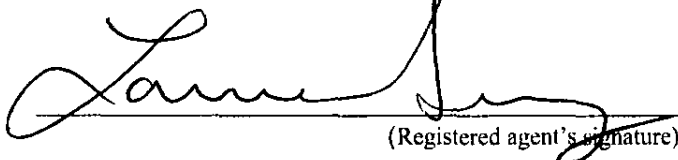
(City)

, Florida 33442

(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.

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

A. DIRECTORS *-NOT elected yet*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ZACHARY SENZ KAMLER

Address: 2363 DEER CREEK TRAIL

DEERFIELD BEACH, FL 33442

Vice President: KEN POMELLA

Address: 8849 CAMERON CREST DRIVE

TAMPA, FL 33626

Secretary: KEN POMELLA

Address: 8849 CAMERON CREST DRIVE, TAMPA FL 33626

Treasurer: ZACHARY SENZ KAMLER

Address: 2363 DEER CREEK TRAIL, DEERFIELD BEACH, FL 33442

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

12. *Zachary Senz Kamler*
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. *Zachary Senz Kamler*
(Typed or printed name and capacity of person signing application)

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2016 JUL 19 A 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MONIKL, INC." IS DULY INCORPORATED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND
HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWELFTH DAY OF JULY, A.D. 2016.



6022413 8300

SR# 20164774007

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 202644145

Date: 07-12-16