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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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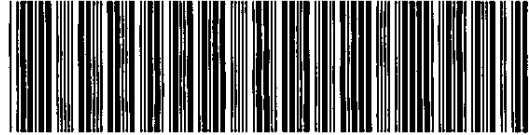
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/26/16--01008--013 **87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations
INNOVATIVE CONSULTING CONCEPTS, INC.

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:
KENYA BROWN

Name of Person
INNOVATIVE CONSULTING CONCEPTS, INC.

Firm/Company
846 RAYMOND STREET

Address
MIAMI BEACH, FLORIDA 33141

City/State and Zip code
kkbrown01@frontier.com

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

For further information concerning this matter, please call:

KENYA BROWN

Name of Person

at (503) 536-3260
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.*

INNOVATIVE CONSULTING CONCEPTS, 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)
OREGON

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
03/21/2011

4. _____ 5. _____
(Date of incorporation) (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)

846 RAYMOND STREET, MIAMI BEACH, FLORIDA 33141

7. _____
(Principal office address)

(Current mailing address, if different)

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

KENYA BROWN

Name: _____

846 RAYMOND STREET

Office Address: _____

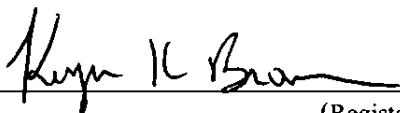
MIAMI BEACH

33141

_____, Florida _____
(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: KENYA BROWN

846 RAYMOND STREET

Address: MIAMI BEACH, FLORIDA 33141

Director: _____

Address: _____

B. OFFICERS

President: KENYA BROWN

846 RAYMOND STREET

Address: MIAMI BEACH, FLORIDA 33141

Vice President: OFFICE VACANT

Address: _____

Secretary: KENYA BROWN

846 RAYMOND STREET, MIAMI BEACH, FLORIDA 33141

Address: KENYA BROWN

Treasurer: 846 RAYMOND STREET, MIAMI BEACH, FLORIDA 33141

Address: _____

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TALLAHASSEE, FLORIDA

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

12. Kenya K Brown
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. Kenya Brown, President

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

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 901L427B3

I, JEANNE P. ATKINS, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

INNOVATIVE CONSULTING CONCEPTS, INC.

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

Jeanne P. Atkins

JEANNE P. ATKINS, SECRETARY OF STATE

7/27/2016

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TALLAHASSEE, FLORIDA

Oregon SECRETARY OF STATE
CORPORATION DIVISION
PUBLIC SERVICE BUILDING
255 CAPITOL ST., NE STE 151
SALEM, OR 97310-1327
(503) 986-2200
Fax (503) 378-4381

JOHN HASBROOK
PO BOX 368
MONMOUTH OR 97361

Order Date	Order #
7/27/2016	488794

Pre-Paid

TOTAL ORDER:	\$10.00
PAID ON ACCOUNT:	\$10.00
TOTAL AMOUNT DUE:	\$0.00