

F1600004655

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000247594 3)))



H160002475943ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
1776, Inc

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

FILED
16 OCT 17 AM 10:29
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT OF STATE

RECEIVED

2017 OCT 17 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANACT BUSINESS IN THE STATE OF FLORIDA.

1776, Inc.

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

Sisco Innovation and Design, Inc.

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

2. MT (State or country under the law of which it is incorporated) 3. n/a (FEI number, if applicable)

4. 12/10/2007 (Date of incorporation) 5. Upon Qualification (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. 4504 Pine Hollow Dr., Tampa, FL 33624 (Principal office address)

4504 Pine Hollow Dr., Tampa, FL 33624 (Current mailing address, if different)

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

Name: REGISTERED AGENTS INC. Office Address: 3030 N. Rocky Point Drive, STE 150A TAMPA, Florida 33607 (City) (Zip code)

15 OCT 17 AM 10:25 RECEIVED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

Bill Havre Bill Havre/Secretary/Registered Agents Inc. (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: _____

Address: _____

Director: Brian Sisco

4504 Pine Hollow Dr., Tampa, FL 33624

Address: _____

Director: Sarah Sisco

4504 Pine Hollow Dr., Tampa, FL 33624

Address: _____

B. OFFICERS

President: Brian Sisco

4504 Pine Hollow Dr., Tampa, FL 33624

Address: _____

Vice President: _____

Address: _____

Secretary: Sarah Sisco

4504 Pine Hollow Dr., Tampa, FL 33624

Address: _____


Treasurer: Brian Sisco

4504 Pine Hollow Dr., Tampa, FL 33624

Address: _____

FILED
16 OCT 7 4M RD 25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Sarah Sisco, Secretary

13. _____

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



CERTIFICATE OF FACT

I, **LINDA McCULLOCH**, Secretary of State for the State of Montana, do hereby certify the following information for the corporation:

1776, INC.

Date Incorporated: **December 10, 2007**

Term: **Perpetual**

Status: **Active Involuntary Intent (Domestic)**

Jurisdiction: **Montana**

Purpose: **ANY LAWFUL BUSINESS**

Registered Agent: **PRIMO INC**

Agent Physical Address: **1215 11TH AVENUE, HELENA, Montana, 59601, United States**

Agent Mailing Address: **1215 11TH AVENUE, HELENA, Montana, 59601, United States**

Principal Office Address:

Incorporators:

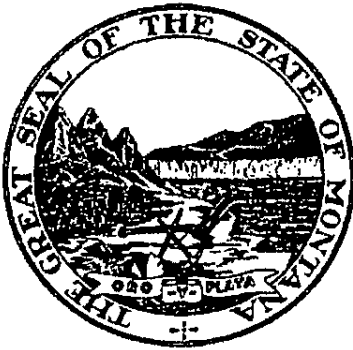
- **Not Entered, Not Entered, Helena, Montana 59601, US**

Directors/Officers:

- **President, SARAH SISCO, 4504 PINE HOLLOW DRIVE, TAMPA, Florida 33624, US**
- **Director, BRIAN SISCO, 4504 PINE HOLLOW DRIVE, TAMPA, Florida 33624, US**

History Details:

- Involuntary Intent Notice Filed 09/01/2016
- Migrated Business Entity Data Filed 08/20/2016
- AMENDMENT Filed 06/09/2011 (- REGISTERED AGENT NAME)
- ARTICLES OF INCORPORATION Filed 12/10/2007
- REPORT Filed 04/07/2008 (- 2008)
- REPORT Filed 02/20/2009 (- 2009)
- REPORT Filed 03/22/2010 (- 2010)
- REPORT Filed 02/07/2011 (- 2011)
- AMENDMENT Filed 06/09/2011 (- REGISTERED AGENT ADDRESS)
- REPORT Filed 01/23/2012 (- 2012)
- REPORT Filed 03/15/2012 (- AMENDED 2012 ANNUAL REPORT)
- REPORT Filed 08/30/2013 (- 2013 E-FILED)
- INTENT TO DISSOLVE INVOLUNTARILY Filed 09/02/2014 (- INTENT OF REVOCATION/INV DISS)
- REPORT Filed 10/14/2014 (- 2014)
- INTENT TO DISSOLVE INVOLUNTARILY Filed 09/01/2015 (- INTENT OF REVOCATION/INV DISS)
- REPORT Filed 11/27/2015 (- 2015 E-FILED)
- REPORT Filed 11/27/2015 (REGISTERED AGENT ADDRESS)



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 29th day of September, 2016.

Linda McCulloch

LINDA McCULLOCH
Montana Secretary of State
Certificate Number: 092920161626