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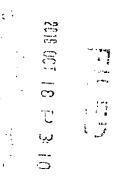
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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D. BRUCE OCT 19 2016

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Stackhouse Capital, Inc. Name of corporation - must include suffix
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:
Jacob Levin
Name of Person
Stackhouse Capital, Inc.
Firm/Company
Firm/Company Address Firm/Company Address
City/State and Zip code/ Jake a Stackhouse Capital.com E-mail address: (to be used for future annual report notification)
City/State and Zip code/
Jake a Stackhouse Capital.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Trah Levin a17 847-2304
Jocob Levin at (917) 847-2304 Name of Person Area Code Daytime Telephone Number
, CO
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \times \

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. Stack wouse (aptal nc; (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. Deleware 3. 47-5393039
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/22/2015 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) 7. HSOO Biscayne Blvd, Ste 206, Miami, FL33137 (Principal office address)
1800 Purdy Ave #211, Miami Beach, FL 33139 (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Jacob Levin
Office Address: 4500 Biscoyne Blvd, Stc 206 Miomi , Florida 33137 (City) (City)
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.
Queol Luin

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: Director: Address: Director: Address: **B. OFFICERS** Vice President: Address: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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

cob Levin, President

a third degree felony as provided for in s.817.155, F.S.

are true and that he or she is aware that false information submitted in a document to the Department of State constitutes

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STACKHOUSE CAPITAL 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 SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STACKHOUSE CAPITAL INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2015.

Authentication: 202975234

Date: 09-12-16

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