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Division of Corporations

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From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120060000045 : (302)645-7400 Phone

Fax Number : (300)645-1280

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

jamie@kayllian.com Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION Kayllian Inc.

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## 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. Kayllian 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) (State or country under the law of which it is incorporated) (FEI number, it applicable) 08/24/2016 (Date of incorporation) no business prior to registration б. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 6727 Third Ave North St. Petersburg FL 33710 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jamie Van Cuyk Name: 6727 Third Ave North Office Address: St. Potorsburg 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		
Chairman:		
Addross:		
Vice Chairman:		
Address:	<del></del>	
Director:	<u>-</u>	
Address:		<u> </u>
	<del>_</del>	SE:
Director:	<u> </u>	AR AR
Address:	28	NRY YRY
	Ä	<u> </u>
B. OFFICERS	ö	LORI
Jamie Van Cuyk President:	9	200
6727 Third Ave North Address:		
St. Petersburg FL 33710		
Vice President:		
Address:		
Secretary:		
Address:		
Trensurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or	directors.	
12. 5 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the fa are true and that he or she is aware that false information submitted in a document to the Department of a third degree felony as provided for in s.817.155, F.S.  Jamie Van Cuyk, President		

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KAYLLIAN 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 TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KAYLLIAN INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

6132513 8300 SR# 20166401277

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

Authentication: 203242129

Date: 10-28-16