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SECRETARY OF STATE A

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D. BRUCE DEC 23 2016

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BONBONS INC	
	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star above referenced foreign corporation to transact business."	nding" and check are submitted to register the
Please return all correspondence concerning this matte	r to the following:
TONY B	ahu
Name of	4
BON BONS	INC =
541 Stat	ely Shoals 第四
PONTE VE	DRA, FL 3008M
INFO @ DINKY D	ond Zip code ONUTS, GOVEN for future annual report notification)
For further information concerning this matter, please	•
long Bahu at 248	, 435-4035
Name of Person Area Coo	de 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 \$\square\$ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

To: FORIDA DEPARTMENT OF State DIVISION OF COrporations ATTENTION: Sheila Young December 19, 2016

From: Tony Bahu
BONBONS INC
541 STATELY Shoals Trail
Panse Vedra, FL 32081
248-933-2033

Sheila,

I release BonBons INC to be USED FOR NEW FILING. NO INTENTION to reinstate.

(90-0499994)

Thankyou



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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. (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) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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

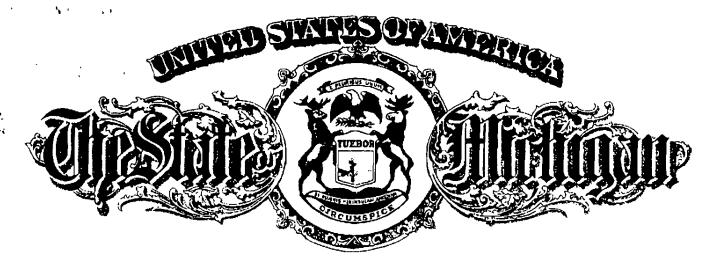
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

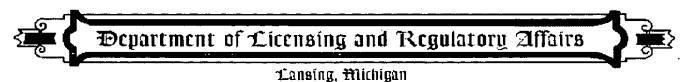
(Registered agent's signature)

duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Tony Bany
Address: 541 Stately Shoals Trail
PONTE VEDRA, FL 32081
Vice Chairman: Jennifer Bahu
Address: 541 Stately Shoals Trail
PONTE Vedra FL 32081
Director:
Address:
D' .
Director:
Address:
AR O
B. OFFICERS
President: 1014 DUILA Shoot Tool Tool
Address: 541 Stately Shoal Trail 55 4
Parte Vedra, FL 32081 \$ w
Vice President: Jenni Fel Banu.
Address: 541 Stately Shoals Trail
Pante Vedra, FL 32081
Secretary:
Address:
Treasurer:
Address:
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 telony 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 a third degree felony as provided for in s.817.155 F.S.

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





This is to Certify That

BON BONS, INC.

was validly incorporated on June 29, 2009, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1419516

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 7th day of November, 2016.

Julia Dale

Julia Dale, Director Corporations, Securities & Commercial Licensing Bureau