

F17000000266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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S Warren

JAN 19 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2017

MARK E. PENA
4230 SO. MACDILL AVE, SUITE I
TAMPA, FL 33611

SUBJECT: SKY DWELLER VENTURES INC.
Ref. Number: W17000002574

We have received your document for SKY DWELLER VENTURES INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$87.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 017A00000691

COVER LETTER

2017 JAN 10 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: SKY DWELLER VENTURES INC.

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:

Mark E. Pena

Name of Person

Law Office of Mark E. Pena P.A.

Firm/Company

4230 So. MacDill Ave Suite I

Address

Tampa FL 33611

City/State and Zip code

Lpena001@tampabay.fl.com

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

For further information concerning this matter, please call:

Mark Pena

Name of Person

at (

813)

Area Code

417-4116

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.

1. SKY DWELLER VENTURES 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)

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

4. November 30, 2016 5. perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. C/O BRINEN & Associates, 7 Dey St. Suite 1503
(Principal office address) NY NY 10007

Same
(Current mailing address, if different)

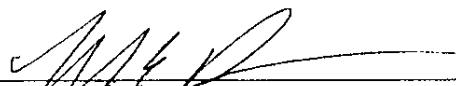
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Mark E. Pena

Office Address: 4230 So MacDill Ave I
Tampa, Florida 33611
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Todd A. Violette

Address: c/o Brinen & Associates 7 Day St. Suite 1503
NY NY 10007

Director: _____

Address: _____

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CLERK OF STATE
TALLAHASSEE FLORIDA

B. OFFICERS

President: Todd A. Violette

Address: c/o Brinen & Associates 7 Day St. Suite 1503
NY NY 10007

Vice President: _____

Address: _____

Secretary: Mark E. Penn

Address: 4230 So MacDill Ave #230 Tampa FL 33611

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 felony as provided for in s.817.155, F.S.

13. Mark E. Penn

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

State of Wyoming

Office of the Secretary of State



United States of America,
State of Wyoming } ss.

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

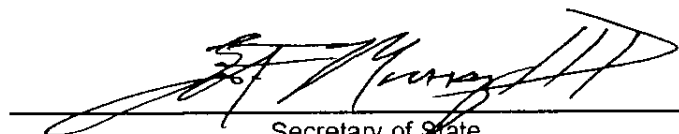
SKY DWELLER VENTURES INC.
is a
Profit Corporation


formed or qualified under the laws of Wyoming did on **November 30, 2016**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000734219**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 28th day of December, 2016 at 8:48 AM.




Secretary of State

By 
Rosalie Gonzales