F1700000571

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
W170 WCC	13223	

Office Use Only



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D. BRUCE FEB 0 7 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2017

JULIA PONTON BRAUN 8280 BOCA RIO DRIVE BOCA RATON, FL 33433

SUBJECT: DESIGN YOU DESIRE, INC.

Ref. Number: W17000003223

We have received your document for DESIGN YOU DESIRE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 817A0000810

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Design lour Desire, Irc. Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Floric "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:	
Julia tortan Drawn	
Name of Person	
Design Laur Dosine, Inc.	
Firm/Company	
8280 Boca Rio Drive	
Address	
D ~ P + 321/33	
City/State and Zip code	1
Ponton julia Protonole BME	
E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:	;
Julia Ponton Braun at (561) 445-10025	
Name of Person Area Code Daytime Telephone Number	
STREET/COURIER ADDRESS: Pagintentian Section Registration Section	
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 \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Certified Copy	Status &

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) (Date of duration, if other than perpetual) (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 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:Brawn
Address: 8280 Bocu RD Driv
Boca Raton, FL 33433
Vice Chairman: Christing Ponton
Address: 8280 Boa Rio Dow
Bocu Paten, FL 33/33
Director:
Address:
Director:
Address:
B. OFFICERS
President: Julia Ponton Braun
Address: 8280 Bocu Rio Dom
Boca Ruton FL 33433
Vice President: Christing Ponton
Address: 8280 Boan Ro Drive
Boan Raton FL 33433
Secretary:
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 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. Julia Porton Braun
(Typed or printed name and capacity of person signing application)

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "DESIGN YOUR DESIRE, 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 THIRTY-FIRST DAY OF JANUARY, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DESIGN YOUR DESIRE, INC." WAS INCORPORATED ON THE FIRST DAY OF JANUARY, A.D. 2017.

TO STATE OF THE PARTY OF THE PA

Authentication: 201961548

Date: 01-31-17