

FT70000001S08

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

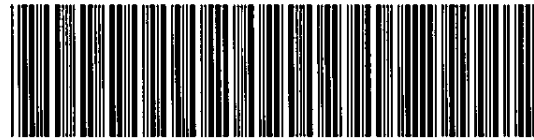
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/30/16--01011--004 **70.00

FILED
17 MAR 30 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

APR 3 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2016

KARI LEFTWICH-WOLFE
2023 NW 5TH STREET
CAPE CORAL, FL 33993

SUBJECT: MY UNDERCOVER AGENT INC.
Ref. Number: W16000080379

2017 MAR 30 PM 3:01
TALLAHASSEE, FLORIDA

We have received your document for MY UNDERCOVER AGENT INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 816A00025599

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations
My Undercover Agent Inc.

SUBJECT: _____
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:
Kari Leftwich-Wolfe

My Undercover Agent Inc.	Name of Person
2023 NW 5th Street	Firm/Company
Cape Coral, Florida 33993	Address
kari@sellingthefloridadream.com	City/State and Zip code
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Kari Leftwich-Wolfe	at (239) 322-9883
Name of Person	Area Code 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

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SECRETARY OF STATE

**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. My Undercover Agent 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. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 9, 2016 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. 2023 NW 5th Street, Cape Coral, Florida 33993
(Principal office address)

(Current mailing address, if different)

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

Name: Kari Leftwich-Wolfe

Office Address: 2023 NW 5th Street

Cape Coral, Florida 33993
(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Kari Leftwich-Wolfe

Address: 2023 NW 5th Street

Cape Coral, Florida 33993

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Kari Leftwich-Wolfe

Address: 2023 NW 5th Street

Cape Coral, Florida 33993

Vice President: Wayne Wolfe

Address: 2023 NW 5th Street

Cape Coral, Florida 33993

Secretary: Wayne Wolfe

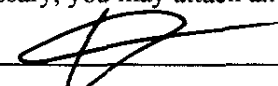
Address: 2023 NW 5th Street, Cape Coral, Florida 33993

Treasurer: Wayne Wolfe

Address: 2023 NW 5th Street, Cape Coral, Florida 33993

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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. Kari Leftwich-Wolfe, President

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

MY UNDERCOVER AGENT LLC
CONSENT TO USE OF SIMILAR NAME

My Undercover Agent LLC, a Florida limited liability company with a registered address of 2023 N.W. 5th Street, Cape Coral, Florida 33993, hereby consents to the use of "My Undercover Agent Inc." as the name of a filing entity in Florida for the purpose of submitting a filing instrument to the Secretary of State.

The undersigned certifies to being authorized by the holder of the existing name to give this consent. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: 12.19.16

MY UNDERCOVER AGENT LLC

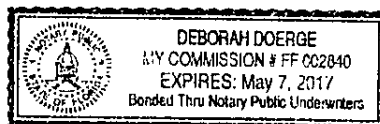
By: Kari Leftwich-Wolfe
Name: Kari Leftwich-Wolfe
Title: Manager

State of Florida
County of Lee

This instrument was acknowledged before me on 12-19-16 by Kari Leftwich-Wolfe.

(Seal)

Deborah Doerge
Notary Public's Signature



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TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MY UNDERCOVER AGENT 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 FIFTEENTH DAY OF MARCH, A.D. 2017.

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TALLAHASSEE, FLORIDA



6208355 8300

SR# 20171634571

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202198852

Date: 03-15-17