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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | |
|--------|--|---|----------------|---------|--|-----------------------|--|
| CHRI | KSJ Fami | • | | | | | |
| SUD | JEC1: | | of corporation | n - m | ust include suffix | | |
| Dear S | Sir or Madam: | | | | | | |
| "Certi | | e," or "Certificate | of Good Sta | nding | norization to Transac "and check are sub Florida. | | |
| | e return all corresp e Stickel | oondence concern | ing this matt | er to t | he following: | | |
| | | | Name o | f Pers | on | | |
| Doubl | le J Family Inc | | | | | | |
| | | | Firm/Co | mpany | / | | |
| 81911 | N Tamiami Trail Su | ite 100 | | | | | |
| | | | Add | ress | | | |
| Saraso | ota FL 34243 | | | | | | |
| | | | City/State | and Z | ip code | | , , , , , , , , , , , , , , , , , , , |
| KSJfa | mily2017@gmail.c | | | | | | |
| | | E-mail addres | s: (to be used | for f | iture annual report r | otific | ation) |
| For fu | irther information | concerning this n | natter, please | call: | | | |
| Georg | ge Stickel | | 941 | | 243-0098 | | |
| | Name of Perso | | at (Area Co | | Daytime Telep | hone 1 | Number |
| | Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee. FL | rporations g Center Circle 232301 | | | MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F | ectior orpora 7 | tions |
| | sed is a check for | the following am \$78.75 Filir Certificate | g Fee & | | 8.75 Filing Fee & rtified Copy | | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

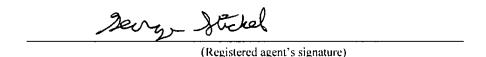
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. | KSJ Family Inc | | | | | | |
|--|------------------------------------|---|---|-------------------------|---|--|--|
| (| Enter name of co 'Inc" "Co" "Co | orporation; must include "INCORPORATED," orp," "Inc." "Co," or "Corp.") | "COMPANY," "C | CORPORATION," | | | |
| | If name unavaila | ble in Florida, enter alternate corporate name | dopted for the purp | pose of transacting bus | iness in Florida) | | |
| 2. | Delaware | 3 | 82-11196600 | | | | |
| (State or country under the law of which it is incorporated) October 3, 2016 | | | (FEI number, if applicable) 5. | | | | |
| ••• | (Date | of incorporation) | (Date of duration, if other than perpetual) | | | | |
| 6. | | | | | | | |
| | | (Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 | | | | | |
| 7 | 6192 Coastal Hi | ghway Lewes DE 19801 | 02, 1 let, to deletin | ne penany naemiy, | | | |
| | | (Princip | al office address) | | | | |
| | 3191 N Tamiami | Trail Sarasota Fl 34243 | | | <u>ت.</u> | | |
| | | (Current maili | g address, if differe | ent) | | | |
| 8. | | et address of Florida registered agent: (P.G George Stickel |). Box NOT acce | ptable) | 19 19 19 | | |
| | Name: | | <u>.</u> | | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | | |
| Office . | ice Address: | 8191 N Tamiami Trail Suite 100 | | | | | |
| | | Sarasota | 342 , Florida | 243 | | | |
| | | (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.



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. DIRECTO | RS |
| Chairman: | |
| Address: | |
| | |
| Vice Chairman: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| | |
| Director: | |
| | (S) |
| | ्रा च |
| B. OFFICER | S |
| Geo: | ge Stickel |
| 8191 | N Tamiami Trail Sarasota FL 34243 |
| <u>-</u> | |
| Vice President: | |
| | |
| Address. | |
| Caaratamu | |
| | |
| | |
| | |
| | |
| NOTE: If nec | essary, you may attach an addendum to the application listing additional officers and/or directors. |
| 12 | Signature of Director or Officer |
| The officer or are true and th | director signing this document (and who is listed in number 11 above) affirms that the facts stated herein at the or she is aware that false information submitted in a document to the Department of State constitutes belong as provided for in s.817.155, F.S. |
| 13. George Sti | ekel President |
| | (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 "KSJ FAMILY 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 SEVENTEENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KSJ FAMILY INC"

WAS INCORPORATED ON THE THIRD DAY OF OCTOBER, A.D. 2016.

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

Authentication: 202383633

Date: 04-17-17

6171606 8300 SR# 20172541052

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