

F17000008787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

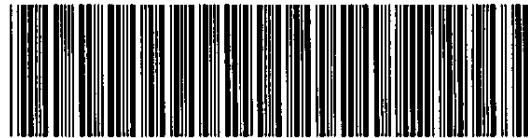
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2017 JUN 19 P 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JUN 20 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2017

DONALD KASEN
8854 VIA BRILLIANTE
WELLINGTON, FL 33411

SUBJECT: INSPIRED STUDIOS, INC.
Ref. Number: W17000041940

RECEIVED
2017 JUN 19 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for INSPIRED STUDIOS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 817A00069848

2017 JUN 19 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations
Inspired Studios, 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:
Donald Kasen

Name of Person
Inspired Studios, Inc.

Firm/Company
8854 Via Brillante

Address
Wellington, FL 33411

City/State and Zip code
DKasen@Inspired-Studios.com

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

For further information concerning this matter, please call:

Donald Kasen 561 333.9142

Name of Person at () 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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2017 JUN 19 P 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.*

Inspired Studios, Inc.

1. _____
(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)
Essex

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
June 30, 1928

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
October 2009

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
8854 Via Brillante, Wellington, FL 33411

7. _____
(Principal office address)

(Current mailing address, if different)

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

Donald Kasen

Name: _____

8854 Via Brillante

Office Address: _____

Wellington

33411

(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) *President*

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

Donald Kasen

Chairman: _____

8854 Via Brillante

Address: _____

Wellington, FL 33411

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

Donald Kasen

President: _____

8854 Via Brillante

Address: _____

Wellington, FL 33411

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Donald Kasen, President

13. _____

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

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

INSPIRED STUDIOS, INC.
6957510000

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on August 12, 1964.

Said business was placed in a pending Reinstatement Process on May 12, 2017, and as of the date of this certificate, has not yet been reinstated, and its Annual Reports are current.

I further certify that the last registered agent and registered office of record were:

*Robert Blackwell
3333 Eisenhower Parkway
LIVINGSTON, NJ 07039*



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
12th day of May, 2017*

*Ford M. Scudder
State Treasurer*

Certificate Number : 2264872963

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp