F17000003721

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Outline Faith Ham)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
<u></u>						
W17-49563 RA + Penalty						
Office Use Only						

VL



700299975697

06/09/17--01011--013 **70.00

08/18/17--01003--002 **650.00

PILED

2017 AUG 16 AMII: 24

SIGNETARY OF STARRAGE

K. SALY AUG 1 8 2017



June 13, 2017

VALERE SAPOT THE BABY BOX COMPANY, INC. 733 SEWARD ST. LOS ANGELES, CA 90038

SUBJECT: THE BABY BOX COMPANY, INC.

Ref. Number: W17000049563

We have received your document for THE BABY BOX COMPANY, 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):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

There is a balance due of \$650.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Letter Number: 817A00011967

COVER LETTER

TO:	P: Registration Section Division of Corporations				
		BOX COMPANY INC	C		
SUB.	JECT:				
		Name of cor	poration -	must include suffix	
Dear S	Sir or Madam:				
"Certi		or "Certificate of G	ood Standi	ng" and check are sub	et Business in Florida," emitted to register the
	e return all correspond RE SAPOT	lence concerning th	is matter to	the following:	
THE I	BABY BOX COMPAN		Name of Pe	rson	
THE	SABT BOX COMPAN	TINC			
733 SI	EWARD STREET	F	irm/Compa	ny	
			Address		· · · · · · · · · · · · · · · · · · ·
LOS A	ANGELES, CALIFORN	IA 90038			
		City	y/State and	Zip code	
Valeri	e@thebabyboxco.com				
		E-mail address: (to	be used for	future annual report r	notification)
For fu	rther information con	cerning this matter.	, please cal	! :	
MICHELLE VICK		3	23	8212604	
	Name of Person	at (rea Code	Daytime Telep	hone 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	
Enclo	sed is a check for the	following amount:			
2 \$7	0.00 Filing Fee	\$78.75 Filing Fee Certificate of Sta		678.75 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. THE BABY BOX COMPANY, INCORPORATED (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) 46-4137221 (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 10963 AYRES AVENUE, LOS ANGELES, CA 90064 (Principal office address) 733 SEWARD STREET, LOS ANGELES, CA 90038 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: Office Address: 1200 South Pine Island Road , Florida Plantation, Florida 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.

> Jenifer Vincent Vice President & Assistant Secretary

(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:	2017 AUG 16 AH 11:2
A. DIRECTORS	2012
JENIFER CLARY HABERER	AUG IC
Chairman: 10963 AYRES AVENUE, LOS ANGELES, CA 90064	-3/1. AH //.
Address:	ALLASIARY
	"SSEE, FIJATI
KEVIN HABERER	
Vice Chairman:	
10963 AYRES AVENUE, LOS ANGELES, CA 90064	
Address:	
MICHELLE VICK	
Director:	
2505 7TH STREET, SANTA MONICA CA 90405	
Address:	
Director:	
Addraes	
Address:	
D AFFIATRA	
B. OFFICERS DANIEL KOHLER COO	
President:	
5489 ALDEN BEND DRIVE, LAS VEGAS, NV 89135	
Address:	
KAYE KRAMER COO	
Vice President:	
335 S MUIRFIELD ROAD, LOS ANGELES, CA 90020	
Address:	
KEVIN HABERER	
Secretary:	
10963 AYRES AVENUE, LOS ANGELES, CA 90064	
Address:	
Treasurer:	
Address:	
OTE: If necessary, you may attach an addendum to the application listing addit	tional officers and/or directors.
2 (Any X of the	
Signature of Director or Officer	
ne officer or director signing this document (and who is listed in number 11 above	
true and that he or she is aware that false information submitted in a document	to the Department of State constitutes
hird degree felony as provided for in s.817.155, F.S.	
Myniel Konier (00	
(Typed or printed name and capacity of person signing ap	oplication)



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

DELAWARE, DO HEREBY CERTIFY "THE BABY BOX COMPANY, 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 EIGHTEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE BABY BOX COMPANY, INC." WAS INCORPORATED ON THE SECOND DAY OF SEPTEMBER, A.D. 2015.

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

2017 AUG 16 AM 11: 24 SILVES MERT OF STATE

e at corp delaware gov/aut

Authentication: 202565167

Date: 05-18-17