

F17000003742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

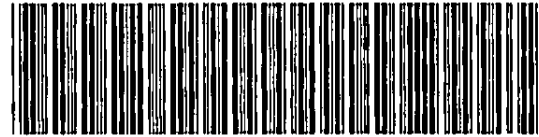
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000301651950

08/18/17--01005--002 **650.00

07/24/17--01017--024 **87.50

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W17-
6-35-8
AUG 18 AM 10:29
FILED

T. BURCH

AUG 21 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RepEquity, Inc.

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:

Kyong Choe

Name of Person

RepEquity, Inc.

Firm/Company

1211 Connecticut Ave. NW, Suite 400

Address

Washington, DC 20036

City/State and Zip code

billing@repequity.com

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

For further information concerning this matter, please call:

Ellie Ellsworth

508

788-1116

at (_____) _____

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2017

KYONG CHOE
1211 CONNECTICUT AVE NW STE 400
WASHINGTON, DC 20036

SUBJECT: REPEQUITY INC.
Ref. Number: W17000061358

We have received your document for REPEQUITY INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

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) 245-6052.

Tim Burch
Regulatory Specialist III

Letter Number: 817A00015050

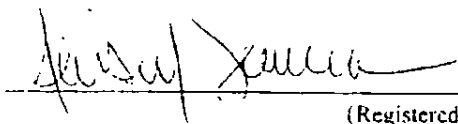
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. RepEquity Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- RepEquity Florida Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 26-3121334
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/04/2008 5.1 Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. 12/16/16
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2155 Lake Baldwin Lane Apt. 201, Orlando, FL 32814
(Principal office address)
- same
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Allison Lawrence
- Office Address: 2155 Baldwin Lane Apt 201
- Orlando 32814
(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.

FILED

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

A. DIRECTORS

Chairman: Raymond Donnelly, III /
1211 Connecticut Ave., NW Suite 400
Address: Washington, DC 20036

Vice Chairman: Mark Slusar /
1211 Connecticut Ave., NW Suite 400
Address: Washington, DC 20036

Director: Chris Harris /
1211 Connecticut Ave., NW Suite 400
Address: Washington, DC 20036

Director: Peter Greenberger /
1211 Connecticut Ave., NW Suite 400
Address: Washington, DC 20036

B. OFFICERS

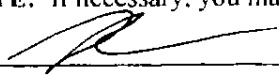
President: Raymond Donnelly, III /
1211 Connecticut Ave. NW, Suite 400
Address: Washington, DC 20036

Vice President: Kyong Choe /
1211 Connecticut Ave. NW, Suite 400
Address: Washington, DC 20036

Secretary: Kyong Choe /
1211 Connecticut Ave. NW, Suite 400, Washington, DC 20036
Address: Washington, DC 20036

Treasurer: Kyong Choe /
1211 Connecticut Ave. NW, Suite 400, Washington, DC 20036
Address: Washington, DC 20036

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. Kyong Choe COO/CFO
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REPEQUITY, 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 THIRTIETH DAY OF JUNE, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED

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4583593 8300

SR# 20175038792

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202811279

Date: 06-30-17