F170000004133

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zip/Fitotie #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Sign + RASIGN W17-71471					
Office Use Only					



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K. SALY SEP | 5 2017

COVER LETTER

TO:	Registration Sec Division of Cor					
	TravelJoll	y.com, Inc.				
SUBJ	ECT:	Name of corr	oration	- must include suffix		
		Nume of corp	, or a or	max morace surm		
Dear S	Sir or Madam:					
"Certi	ficate of Existence	ion by Foreign Corporate," or "Certificate of Gon corporation to transac	od Stan	ding" and check are sub	ct Business in Florida," omitted to register the	
	return all corresp d Kiesel	ondence concerning thi	s matter	to the following:		
		N	ame of l	Person		
KDK /	Accountancy Corpo	ration				
		Fir	rm/Com	pany		
555 W	inderley Place, Suit	e 114				
	<u> </u>		Addre	ss		
Maitla	nd, FL 32751					
-		City	/State ar	nd Zip code	<u></u>	
BK@c	orlandocpa.net					
		E-mail address: (to b	e used f	or future annual report	notification)	
For fu	rther information	concerning this matter,	please c	all:		
Bernard Kiesel 4)7	677-1040		
	Name of Person	at (rea Code	Daytime Telep	hone Number	
	Name of Fersor	ı Al	ica Couc	: Daytine reiep	mone 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		
Enclos	sed is a check for t	the following amount:				
3 \$70	0.00 Filing Fee	S78.75 Filing Fee of Certificate of State		\$78.75 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.

Trav	elJolly.com, Inc.		
(Ente	r name of corporation; must include "INCORPORATE " "Co.," "Corp." "Inc.," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	<u></u>
Wyo	ming	me adopted for the purpose of transacting business in Florid 46-0901352	ia)
08/2	te or country under the law of which it is incorporated) 8/2012		
"-	(Date of incorporation)	5(Date of duration, if other than perpetual)	
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
	(Prin	ncipal office address)	_ _
	(Current ma	ailing address, if different)	
8. Nam	e and <u>street address</u> of Florida registered agent: (Bernard Kiesel Name:	(P.O. Box NOT acceptable)	FILED 37
Office 4	555 Winderley Place, Suite 114		PK -
omet i	Maitland	32751 . Florida	: 31
	(City)	(Zip code)	
Having designa further	ted in this application, I hereby accept the appoi	ervice of process for the above stated corporation at intment as registered agent and agree to act in this cles relative to the proper and complete performance on sof my position as registered agent.	apacity. 1
	(Registere	red 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 SEP 15 PM 4:37 A. DIRECTORS Bernard Kiesel Chairman: 555 Winderley Place, Suite 114 Address: Maitland, FL 32751 Vice Chairman: Address: Address: **B. OFFICERS** Bernard Kiesel President: 555 Winderley Place, Suite 114 Address: Maitland, FL 32751 Vice President: Address: _____ Bernard Kiesel Secretary: 555 Winderley Place, Suite 114, Maitland, FL 32751 Address: Bernard Kiesel Treasurer: __ 555 Winderley Place, Suite 114, Maitland, FL 32751 Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Bernard Kiesel, President 13. (Typed or printed name and capacity of person signing application)

STATE OF WYOMING Office of the Secretary of State

2017 SEP 15 PM 4:37

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

TravelJolly.com, Inc.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **August 28, 2012**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2012-000628223**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 25th day of August, 2017 at 10:46 AM. This certificate is assigned 023955325.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.



August 30, 2017

BERNARD KIESEL KDK ACCOUNTANCY CORPORATION 555 WINDERLEY PL, STE. 114 MAITLAND, FL 32751

SUBJECT: TRAVELJOLLY.COM, INC.

Ref. Number: W17000071471

We have received your document for TRAVELJOLLY.COM, 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 registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Letter Number: 617A00017958

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