

F17000005245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

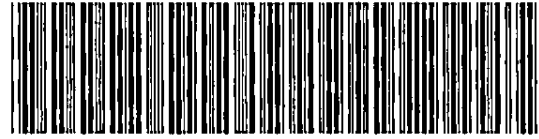
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/16/17--01021--024 **70.00

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NOV 21 AM 11:16
TALLAHASSEE STATE
OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

J. LEGGETT
NOV 21 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2017

CATHY A. KING
1314 E LAS OLAS BLVD #47
FT LAUDERDALE, FL 33301 US

SUBJECT: SECURE EQUITIES INC.
Ref. Number: W17000092030

We have received your document for SECURE EQUITIES 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 name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 617A00023383

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Secure Equities 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:

Cathy A. King

Secure Equities Inc.
Name of Person

Firm/Company

1314 E. Las Olas Blvd. #47

Address

Ft. Lauderdale, FL 33301

City/State and Zip code

Cathy57TBird@yahoo.com

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

For further information concerning this matter, please call:

Cathy A. King at (562) 533-7001
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

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. Secure Equities Inc.
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

OP * Secure Equities Realty Inc.
 (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 46-5343035
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 7, 2014 5. _____
 (Date of incorporation) (Date of duration, if other than perpetual)

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

7. 1314 E. Las Olas Blvd. #47, Ft. Lauderdale, FL 33301
 (Principal office address)

 (Current mailing address, if different)

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

Name: Business Filings Incorporated
 Office Address: 1200 S. Pine Island Rd.
Plantation, Florida 33324
 (City) (Zip code)

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 DEPARTMENT OF STATE
 TALLAHASSEE, 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.

Walter P. Jones, Asst. Sec. Business Filings Incorporated
 (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:

A. DIRECTORS

Chairman: Cathy A. King
Address: 1314 E. Las Olas Blvd. #47
Ft. Lauderdale, FL 33301

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Cathy A. King
Address: 1314 E. Las Olas Blvd #47, Ft. Lauderdale, FL 33301

Vice President: _____
Address: _____

Secretary: Cathy A. King
Address: 1314 E. Las Olas Blvd #47, Ft. Lauderdale, FL 33301

Treasurer: _____
Address: _____

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. Cathy A. King, President
(Typed or printed name and capacity of person signing application)

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SECURE EQUITIES 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 FOURTEENTH DAY OF NOVEMBER, 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.



5512331 8300

SR# 20177066015

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

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

Authentication: 203563870

Date: 11-14-17

2017 NOV 21 AM 10:26

If you have any questions
Cathy King
(562) 533-7001

SECURE EQUITIES INC
1314 E LAS OLAS BLVD #47
FORT LAUDERDALE FL 33301-2391

1020

11-35/1210 CA
70229



DATE 11/13/17

PAY TO THE
ORDER OF

Division of Corporations

\$ 70.⁰⁰/₁₀₀

Seventy + ^{no}/_{100ths}

DOLLARS  

Bank of America 

ACH R/T 121000358

FOR _____

Cathy King

⑈001020⑈ ⑆121000358⑆ 325071615989⑈

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