# F18000001184

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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February 13, 2018

HARRISON R MURPHY 34517 PARKVIEW AVENUE EUSTIS, FL 32736-7280

SUBJECT: SPUNGOLD, INC. Ref. Number: W18000014493

We have received your document for SPUNGOLD, 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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.

Yasemin Y Sulker Regulatory Specialist II

DEPARTMENT OF STATE AVISION OF CORPORATION OF CORPORATION OF TAYLORY OF TAYLO

Letter Number: 418A00003074

### **COVER LETTER**

TO:	Registration Section Division of Corporate					
	Spungoli					
SUBJ	ECT:	Name of o	corporation	- must	include suffix	
Door 9	Sir or Madam:		•			
"Certi		" or "Certificate of	Good Star	iding" :	and check are subm	Business in Florida," itted to register the
	return all correspo RISON R. MURPHY	ndence concerning	this matter	to the	following:	
			Name of	Person		
SPUN	GOLD, INC.					
			Firm/Com	pany		
34517	PARKVIEW AVEN	UE				
			Addre	2SS		
EUST	IS, FLORIDA 32736	-7280				
	_		City/State a	nd Zip	code	
hmurp	hy@spungold.us				<u> </u>	· · · · · · · · · · · · · · · · · · ·
		E-mail address: (	to be used	for futu	ire annual report no	tification)
For fu	rther information co	oncerning this mat	er, please o	all;		
MICH	AL D. SLAVIK		407		1-7868	
	Name of Person	at	( Area Cod		Daytime Telepho	one Number
	STREET/COUR Registration Sect Division of Corpo Clifton Building				MAILING ADI Registration Sec Division of Corp P.O. Box 6327	tion
	2661 Executive C Tallahassee, FL				Tallahassee, FL	32314
Enclo	sed is a check for th	e following amour	ıt:			
□ \$7	0.00 Filing Fee	☐ \$78.75 Filing F Certificate of S			75 Filing Fee & fied 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.

	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,	"COMPANY," "CORPORATION,"	
SPUNGO	LD FABRICS, INC.			
(If name unevails DELAWARE 2.	ble in Florida, enter alternate corporate nas	ne 3.	adopted for the purpose of transacting b	osiness in Plorida)
	y under the law of which it is incorporated)	_ ~		
	of incorporation) , 2018	<b>J</b> .	(Date of duration, if other the	na perpetual)
34517 PARKVIE		7.1	Plorida, if prior to registration) 502, F.S., to determine penalty liability) 60	
SAME AS ABO	<b>\-</b>	ncl	cal office address)	
	(Current m	aili	ng address, if different)	8 HAR
8. Name and <u>stree</u> Name:	nt address of Florida registered agent: ( A SUE ATWOOD	( <b>P</b> .	O. Box NOT acceptable)	2 AH
Office Address:	34517 PARKVIEW AVENUE		 	
	(City)		Florida (Zip code)	·

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept vervice 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.

A Sur ATWOOD (Registered agent's migmature)

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. DIRE							
Chairman:							
Address:	34517 PARKVIEW AVENUE						
_	EUSTIS, FL 32736-7280						
Vice Chair	MICHAL D. SLAVIK						
	1332 MAYFLOWER DRIVE						
	McLEAN, VA 22101						
Director:							
Address:							
Director:							
Address.							
B. OFFI	CEDS	· · · <u> </u>					
	HARRISON R. MURPHY	00 III 3.*					
	34517 PARKVIEW AVENUE	- <del> </del>	· -				
Address:	EUSTIS, FL 32736-7280	***	ï				
Via Davai	MICHAL D. SLAVIK	- <del>1</del>					
	dent:	, 6					
Address:	McLEAN, VA 22101						
Secretary:	HARRISON R. MURPHY						
Address:	SAME AS ABOVE						
Treasurer:	HARRISON R. MURPHY						
Address:	SAME AS ABOVE						
	If necessary you may attach an addendum to the application listing additional officers	and/or directors					
12.	If necessary, you may attach an addendum to the application listing additional officers:	and/or directors.					
	Signature of Director or Officer						
are true a a third de	er or director signing this document (and who is listed in number 11 above) affirms that nd that he or she is aware that false information submitted in a document to the Departigree felony as provided for in s.817.155. F.S.  RISON R. MURPHY, PRESIDENT						

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SPUNGOLD, 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 JANUARY, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPUNGOLD, INC."

WAS INCORPORATED ON THE THIRTIETH DAY OF AUGUST, A.D. 2002.

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

Authentication: 202058906

Date: 01-30-18

3564273 8300 SR# 20180589915