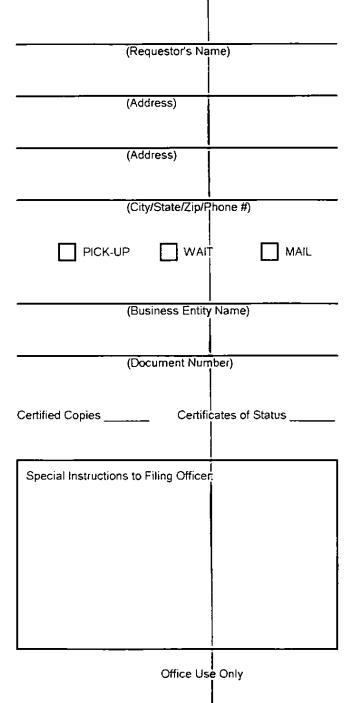
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DIVISION OF CORPERA CIDA

M. MILLIGAN MAY 11 2016

## **COVER LETTER**

TO: Registra		ection rporations			
		· Marketing Inc.			
SUBJECT: _			<u> </u>		<del></del>
		Name of corpora	tion	- must include suffix	
Dear Sir or Mad	dam:				
"Certificate of I	Existenc	tion by Foreign Corporation ce." or "Certificate of Good on corporation to transact bu	Stand	ling" and check are sub-	
Please return al	l corres <sub>i</sub>	pondence concerning this ma	atter	to the following:	
Cory L. Robinso	1			Ų	
	1 1	Name	of P	erson	· · · · · · · · · · · · · · · · · · ·
Cory L. Robinso	n CPA P		. 01 1	Cison	
	<u>_</u>	Firm/C	Comp	oany	· · · · · · · · · · · · · · · · · · ·
2098 Teron Trac	e. Suite	200		_	
		A	ddres	SS	
Dacula, GA 300	19				
	1	City/Sta	te an	d Zip code	
cory@coryrobin:	sonepa e	om			
	<del>-</del>	E-mail address: (to be us	ed fo	or future annual report n	otification)
For further info	mnation	concerning this matter place		s11.	
ror lurther into	mation	concerning this matter, plea	ise ca	ш.	
Cory Robinson		770		614-4014	
Name e	of Perso	on Area (		_) Daytime Teleph	none Number
1,4411				isayama sarap.	
Registra	ation S			MAILING AI Registration So Division of Co	ection
Division of Corporations Clifton Building				P.O. Box 6327	
2661 E:	xecutive	Center Circle 32301		Tallahassee, F	L 32314
Enclosed is a ch	neck for	the following amount:			
■ \$70.00 Filin	g Fee	☐ \$78.75 Filing Fee & Certificate of Status	٥	\$78.75 Filing Fee & Certified Copy	S87.50 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.

	ing Inc.				
			COMPANY," "CORPORATION,"		
(It name unavailal	ole in Florida, enter alter	,	·	siness in Florida)	
		3			
•	under the law of which	it is incorporated)	(FEI number, if applied	ible)	
		5			
January 1, 2018	of incorporation)		(Date of duration, if other than	perpetual)	
	(SEE SECTION	NS 607.1501 & 607.1502.			
		(Principal o	office address)		
···		472	)	- Sion	
		(Current mailing a	daress, if different)		٦,
Name and street		egistered agent: (P.O. E	Box NOT acceptable)	<b>0</b> 명시 유	; יי
Name:	Jason Forthofer		_		
Tice Address:	195 Wekiva Springs I	Road, Suite 212	_	16	ā
	Longwood		32779 Florida		
	((	City)	(Zip code)		
aving been name signated in this c rther agree to co	ed as registered agent application, I hereby amply with the provisi	accept the appointmentions of all statutes rela	nt as registered agent and agree to tive to the proper and complete p	o act in this capacity.	
	(Enter name of co "Inc" "Co" "Co  (If name unavailat Georgia  (State or country 1/16/2014  (Date of January 1, 2018  195 Wekiva Spring  Name:  Registered ages aving been name signated in this of rther agree to co	(Enter name of corporation; must include "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Co	(Enter name of corporation: must include "INCORPORATED." "Co.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name ado Georgia 3.  (State or country under the law of which it is incorporated)  [Oute of incorporation]  [SEE SECTIONS 607.1501 & 607.1502]  [SEE SECTIONS 607.1501 & 607.1502]  [Principal of Courrent mailing and to accept service assignated in this application, I hereby accept the appointment of the registered agent of all statutes relatives."	(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 but Georgia 3. (FEI number, it applies 1/16/2014 5. (Date of incorporation) (Date of incorporation) (Date of duration, if other than January 1, 2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 195 Wekiva Springs Road. Suite 212, Longwood, FL 32779 (Principal office address)  (Current mailing address, if different)  Name: 195 Wekiva Springs Road. Suite 212  Longwood , Florida 32779  (City) (City) (Zip code)  Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated cosignated in this application, I hereby accept the appointment as registered agent and agree to signated in this application, I hereby accept the appointment as registered agent and agree to the state of the stat	(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)  Georgia  46-4567977  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of duration, if other than perpetual)  January 1, 2018  (Date of incorporation)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office address)  (Principal office address)  (Current mailing address, if different)  Name:  195 Wekiva Springs Road. Suite 212  Longwood  (City)  Registered agent's acceptance:  196 Wekiva Springs Road. Suite 212  Longwood  (City)  Registered agent and to accept service of process for the above stated corporation at the place signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity, rither agree to comply with the provisions of all statutes relative to the proper and complete performance of my

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.

(1. Names and business addr  A. DIRECTORS  Jason Forthofer  Chairman:	esses of officers and/or directors:
654 Pine Shadow Cou	rt, Longwood, FL 32779
Address:	5 ×
Jason Forthofer	
	rt, Longwood, FL 32779
Additas:	
Jason Forthofer Director:	
654 Pine Shadow Cou Address:	rt. Longwood, FL 32779
Director:	
B. OFFICERS  Jason Forthofer	
President:654 Pine Shadow Cou	rt, Longwood, FL 32779
Address:	
Jason Forthofer Vice President:	
654 Pine Shadow Cou	rt, Longwood, FL 32779
Address:	
Jason Forthofer Secretary:	
	rt. Longwood, FL 32779
Jason Forthofer Treasurer:	
	rt. Longwood, Fl. 32779
<del></del>	yattach an addendum to the application listing additional officers and/or directors.
12	1 /2 /2/)
	Signature of Director or Officer this document (and who is listed in number 11 above) affirms that the facts stated herein
are true and that he or she is a a third degree felony as provide	ware that false information submitted in a document to the Department of State constitutes
Jason Forthofer, President	
(Type	ed or printed name and capacity of person signing application)

Control Number: 14005816

## STATE OF GEORGIA

#### **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### FORTHOFER MARKETING INC

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 15763057
Date Inc/Auth/Filed: 01/16/2014
Jurisdiction : Georgia
Print Date : 04/25/2018
Form Number : 211



B: P. Kemp Secretary of State