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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

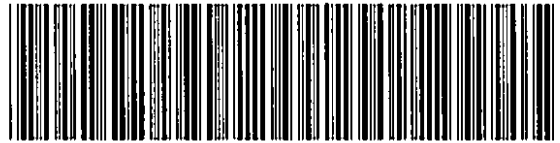
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TALLAHASSEE, FLORIDA

K. SALY
JUL 25 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infinite Solutions Global, Inc. DBA Infinite
Name of corporation - must include suffix Construction

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:

MARISA J. BRAXTON CEO/PRESIDENT (CRA)
Name of Person

Infinite Solutions Global, Inc. DBA Infinite
Firm/Company Construction
1807 #6 St. 308th Ct.
Address

Federal Way, Washington 98003
City/State and Zip code

infinite-solutions-global-inc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARISA BRAXTON at (206) 487-9462
Name of Person Area Code Daytime Telephone Number
OR

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. Infinite solutions global, Inc. DBA Infinite
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") Construction

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington 3. 92-4594000
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/27/2018 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) 98003

7. 1807 #6 So 308th Ct Federal Way, Wa 98003
(Principal office address)

(Current mailing address, if different)

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

Name: Kenyatta Facyson

Office Address: 970 Lak Carillon Dr #300,

St. Petersburg, Florida 33716
(City) (Zip code)

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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.

Kenyatta Facyson
(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: Johnathan Forman

Address: 970 Lake Carillon Drive, Ste. 300
St. Petersburg, FL. 33716

Vice Chairman: Shannon Owens

Address: 970 Lake Carillon Drive, Ste. 300
St. Petersburg, FL. 33716

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MARISA Shannon Braxton

Address: 1807 So 308th Ct. #6
Federal Way, Wa 98003

Vice President: Kevin Turner

Address: 28030 & 136th Ave SE
Kent, Wa. 98042

Secretary: Stevenson Coleman

Address: 704 K Avenue Greenwood, MS 38930

Treasurer: Zavier Braxton

Address: 11614 Ambaum Blvd SW

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. MARISA Shannon Braxton CEO/President

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. MARISA Shannon Braxton CEO/President &

(Typed or printed name and capacity of person signing application)

Commercial
Registered
Agent

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TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of  Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

INFINITE SOLUTIONS GLOBAL, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 02/27/2018.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 07/06/2018
UBI Number: 604 232 586



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital, on

Kim Wyman

Kim Wyman, Secretary of State

Date Issued: 07/06/2018

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA