F1800003872

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(220,11200 2,111,111111)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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FILE PH 2: 46

n RRUCE AUG 23 2018

COVER LETTER

TO: Registration Se						
	& LEON INC					
SUBJECT:	Name of corporation	n - must include suffix				
Dear Sir or Madam:						
"Certificate of Existent	tion by Foreign Corporation for ce," or "Certificate of Good Sta gn corporation to transact busin	nding" and check are sub-				
Please return all corres	pondence concerning this matte	er to the following:				
RUBEN CIELAK						
	Name of	Person				
RUBEN & LEON INC						
	Firm/Cor	npany				
5002 VENICE BLVD						
	Addr	ress		_		
LOS ANGELES, CA 900	019-5308				~3	
	City/State a	and Zip code		5±0 5±0	013	
RUBEN@TAKOTYKO.				<u> 걸음</u>	AUG	j ann:
	E-mail address: (to be used	for future annual report ne	otification)	355	 en	-
For further information	concerning this matter, please	call:		in-s mc _t	70	17
NICK ESTRADA	323	937-4445		FL0	EJE N	,
Name of Perso	at ()	one Number		2: 46	-1
Name of Ferso	71,64 000	ic Bayune retepti		3.>		
STREET/COL Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle	MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction rporations			
Enclosed is a check for	the following amount:					
■ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	1 \$78.75 Filing Fee & Certified Copy	S87.50 Filin Certificate (Certified Co	of Status	<u>ዩ</u>	

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.

"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")			
Tako Tyko Sig	ns and Lighting INC			
(If name unavai	lable in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting busine	ss in Florida)	
2. CA		3		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable))	
4. 12/20/1988		5		
(Date	e of incorporation)	(Date of duration, if other than per	petual)	
6. N/A				
		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)		
7, 5002 VENICE B	SLVD, LOS ANGELES, CA 90019-5308			
	(Prin	cipal office address)	SECHT	
			<u> </u>	
	(Current ma	ling address, if different)	ASS an	_
		A D NOT	m ^{**}	_
8. Name and stre	et address of Florida registered agent: (1	2.O. Box NOT acceptable)		-
Name:	C T Corporation System		516/15 108/07	٠,,
Office Address:	1200 South Pine Island Road		35 m	
	Plantation	, Florida 33324 (Zip code)		
	(City)	(Zip code)		
Having been nan designated in this further agree to c	application, I hereby accept the appoin	/	t in this capacity. I ormance of my Smith	
Ву:	//////////////////////////////////////	\leftarrow		
_	(Registere	d 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: Address: ___ Vice Chairman: Address: Director: _ Address: Director: _ Address: _ **B. OFFICERS** Ruben Cielak President: 2847 Forrester Drive Address: Los Angeles, CA 90064 Vice President: Address: Secretary: _ Address: __ Treasurer: _______ 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. 13.

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

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

RUBEN & LEON, INC.

FILE NUMBER:

C1453120

FORMATION DATE:

12/28/1988

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 24, 2018.

ALEX PADILLA
Secretary of State