F18000004622

(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:						

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09/10/18--01021--001 **70.00

FILED 2018 DCT -5 AM 11: 23 SECRETARY OF STAIN

N CULLIGAN: 0CT - 5 2018

COVER LETTER

TO:	Registration Section Division of Corporations						
		st Designs, Inc					
SUBJ	ECT:						
		Name o	f corporation	- must includ	e suffix		
Dear S	Sir or Madam:						
"Сепі		e," or "Certificate	of Good Star	ding" and che		nct Business in Florida," bmitted to register the	
	return all corresp jia Lee	ondence concernir	ng this matter	to the follow	ing:		
			Name of				
Wand	e <mark>rlust Design</mark> s, Inc	:					
1903	12th st n		Firm/Com	pany	••		
			Addre	ess			
St Pet	ersburg, FL 33704	!					
wande	erlustcustomfabric	@gmail.com	City/State a	nd Zip code		AP48	
		E-mail address:	(to be used f	or future annu	ial report	notification)	
For fu	rther information of	concerning this ma	itter, please c	all:			
Georgia Lee			865	566-5323	566-5323		
Name of Person		at (Area Cod) e Dayt	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		Section orporations 7	
Enclos	sed is a check for t	he following amo	unt:				
\$7 (0.00 Filing Fee	□ \$78.75 Filing Certificate of		\$78.75 Filin Certified Co	_	S87.50 Filing Fee, Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2018

GEORGIA LLE 1903 12TH ST N ST. PETERSBURG, FL 33704

SUBJECT: WANDERLUST DESIGN, INC.

Ref. Number: W18000081420

We have received your document for WANDERLUST DESIGN, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 318A00018943

www.sunbiz.org

L' DO DOY COOR MILL BLUE COOL

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. Wanderlust Designs, Inc. 1. (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) Tennessee 81-4809478 (FEI number, if applicable) (State or country under the law of which it is incorporated) 01/01/2017 (Date of duration, if other than perpetual) (Date of incorporation) 8/01/2018 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1903 12th St N St Petersburg, FL 33704 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Georgia Lee Name: 1903 12th St N Office Address: St Petersburg 33704 . Florida (City) (Zip code) 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. (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: Vice Chairman: Address: ______ Director: **B. OFFICERS** Georgia Lee President: 1655 Manor Way S Address: St Petersburg, FL 33712 Benjamin Lee Vice President: 1655 Manor Way S Address: St Petersburg, FL 33712 Benjamin Lee Secretary: 1655 Manor Way S Address: St Petersburg, FL 3312 Georgia Lee Treasurer: 1655 Manor Way S Address: St Petersburg, FL 33712 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.

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



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

GEORGIA LEE

1655 MANOR WAY S

ST PETERSBURG, FL 33712

September 3, 2018

Request Type: Certificate of Existence/Authorization

Request #:

0288139

Issuance Date: 09/03/2018

Copies Requested:

Document Receipt

Receipt #: 004270488

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3738963748

\$20.00

Regarding:

Wanderlust Designs, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 12/15/2016

Status:

Active

Duration Term:

Perpetual

Business County: KNOX COUNTY

Control #:

879203

Date Formed:

01/01/2017

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Wanderlust Designs, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett

Secretary of State

Processed By: Cert Web User Verification #: 029364942