(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone #	<del>()</del>			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Name	)			
(Do	ocument Number)				
Certified Copies	_ Certificates o	f Status			
Special Instructions to Filing Officer:					
/					

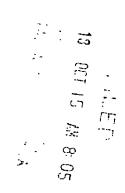
Office Use Only



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## COVER LETTER

TO: Registration Section Division of Corpora	i Lijons			
GIG FORCES	SINC.			
SUBJECT:	Name of corporation -	must	include suffix	
	.,,			
Dear Sir or Madam:				to a Elorida "
"Certificate of Existence, above referenced foreign of	by Foreign Corporation for A or "Certificate of Good Stand corporation to transact business	s in F	lorida.	ed to register the
Please return all correspor	dence concerning this matter	to the	tollowing:	
Heather Fogg				
	Name of	Persor	1	
GIG FORCES INC.				
	Firm/Corr	рапу		
11903 NW Thompson Rd				
	Addr	css	<del></del> -	
Portland OR 972229				
	City/State a	and Zi	p code	
heather@ondiem.com				
	E-mail address: (to be used	for fu	ture annual report not	ification)
For further information of	concerning this matter, please			
Joe Fogg	503	, 3	41-5087	
Name of Person	at ( Area Co	/ _ de	Daytime Telepho	one Number
Name of reisor				
Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassec, FL	porations 3 Center Circle 32301		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Enclosed is a check for				m torsa William Coa
☐ \$70.00 Filing Fce	☐ \$78.75 Filing Fee & Certificate of Status		78.75 Filing Fee & ertified 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.

(Enter name of cor "Inc.," "Co.," "Cor	poration; must include "INCORPORATED, p," "Inc," "Co," or "Corp.")	, 00		
(If name unavailab	ole in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	isiness in Florida)	
		92_1423416		
(State or country	under the law of which it is incorporated)	(FEI number, if applic	(FEI number, if applicable)	
(Date of	(Date of incorporation) 5		n perpetual)	
N/A				
	(Date first transacted business) (SEE SECTIONS 607.1501 & 607. oson Rd, Portland OR 97229	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	: i	
		(Principal office address)		
	(Current mai	iling address, if different)	8 Oc	
. Name and stree	t address of Florida registered agent: (I	P.O. Box NOT acceptable)	, ,	
Name:	Derek Lee Duke, Jr.			
Office Address:	5001 SW Orchid Bay Dr.			
	Palm City	34990 , 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 Joe Fogg Chairman: 11903 NW Thompson Rd, Portland OR 97229 Address: \_ Vice Chairman: Address: Director: Address: Address: \_\_\_ B. OFFICERS Joe Fogg President: \_ 11903 NW Thompson Rd. Portland OR 97229 Address: \_ Vice President: Address: Secretary: Treasurer: 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 locument (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 third degree felony as provided for in s.817.155, F.S. Joe Fogg, CEO (Typed or printed name and capacity of person signing application)



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

DELAWARE, DO HEREBY CERTIFY "GIG FORCES 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 TWENTY-SEVENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GIG FORCES INC."

WAS INCORPORATED ON THE THIRD DAY OF APRIL, A.D. 2017.

Authentication: 203140901

Date: 07-27-18