F1800000005071

| (Req | uestor's Name) | · |
|---------------------------|-----------------|-------------|
| (Addi | ress) | |
| (Addi | ress) | |
| (City/ | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | iness Entity Na | me) |
| (Doc | ument Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
| | | |
| | | |
| | | |

Office Use Only



400318193744

89/10/18--01021--003 **70.00



NOV -6 L.

COVER LETTER

| _ | tration Section ion of Corporations | | | |
|---|--|-------------------|--|--|
| SUBJECT: | Cascle Inc | | | |
| SUBJECT | Name | of corporation - | must include suffix | |
| Dear Sir or M | adam: | | | |
| "Certificate o | "Application by Foreign C f Existence," or "Certificat ced foreign corporation to | e of Good Stanc | ling" and check are sub | |
| Please return Deven Werling | all correspondence concerr | ning this matter | to the following: | |
| | | Name of P | erson | |
| Cascle Inc | | _ | | |
| | | Firm/Comp | any | |
| 1875 Indian Ro | ocks Road S. | , | | |
| Largo, FL 337 | 74 | Addres | s | |
| | · - | City/State an | d Zip code | |
| mcarraro@efx | fs.com | , | | · |
| | E-mail addres | s: (to be used fo | r future annual report r | notification) |
| For further in | formation concerning this r | natter, please ca | II: | • |
| Deven Werling | ; | 888 at (| 894.4088 | |
| Name | e of Person | Area Code | Daytime Telep | hone Number |
| | | | | |
| Regis Divisi Clifto 2661 Tallah | tration Section ion of Corporations in Building Executive Center Circle massee, FL 32301 | | MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F | ection orporations 7 |
| ■ \$70.00 Fil | check for the following aming Fee | ng Fee & 🔲 | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |



September 12, 2018

DEVEN WERTLING 1875 INDIAN ROCKS ROAD S. LARGO, FL 33774

SUBJECT: CASCLE INC Ref. Number: W18000081400

We have received your document for CASCLE 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.

Letter Number: 918A00018940

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

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 | orporation; must include "INCORP forp," "Inc," "Co," or "Corp.") | ORATED," "COMPANY, | " "CORPORAT | TON," | | _ |
|-------------------|---|--------------------------------------|--|---------------------------------------|-----------------|------------|
| | | , | • | | | |
| (If name unavail | able in Florida, enter alternate corpo | prate name adopted for the r | numose of transa | icting husi | ness in Florida | _ |
| Delaware | , | 83-1337167 | | | | |
| (State or countr | y under the law of which it is incorp | oorated) | (FEI number, i | f applicab | le) | |
| (Date | of incorporation) | 5 | of duration, if of | ther then n | amatual) | _ |
| | or meorporation, | (Date | or duration, ir or | mer man p | · . | |
| · | (Date first transacted | business in Florida, if prior | | | | _ |
| • | (SEE SECTIONS 607.150 | 1 & 607.1502, F.S., to dete | r to registration) ermine penalty lia | ability) | | |
| 1875 Indian Rock | ks Road S., Largo, FL 33774 | • | | • | | |
| • | · · · · · · · · · · · · · · · · · · · | (Principal office address | s) | · · · · · · · · · · · · · · · · · · · | | <u>-</u> |
| same | | | | • | 2018 | |
| | (Cu | rrent mailing address, if dif | Terent) | | 温 | ٦١ - سد |
| | • | | | ٠. | 1 | . T |
| . Name and stree | et address of Florida registered a | gent: (P.O. Box NOT ac | cceptable) | | 35.6 | , II |
| N | Deven Werling | | | | | ž (|
| Name: | 1975 I I' D . 1 . D 1 C | · · | | • | | F |
| office Address: . | 1875 Indian Rocks Rd S | · | | | 22 22 | 0 |
| | Largo | Flacida | 33774 | | | |
| | . (City) | , Florida . | (Zip code) | | | |
| | | | ` ' ' | | <u>:</u> | |
| | ent's acceptance: led as registered agent and to ac | ecant camilaa a Comaaaaa | Con tha abous ar | intad au | | |
| esignated in this | application, I hereby accept the | e appointment as registe. | red agent and | agree to d | act in this cap | acity. |
| irther agree to c | omply with the provisions of all | statutes relative to the p | proper and con | iplete per | formance of | my |
| uties, ana i am j | amiliar with and accept the obli | | is registered ag | ent. | | |
| | . • | Rhubble | | • | | |
| | | المستحمل المراكم المراكم ومدور الراج |) | | | |

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 Deven Werling Chairman: 4875 Indian Rocks Rd. S Address: Largo, FL 33774 Vice Chairman: Address: Director: Address: **B. OFFICERS** Deven Werling President: _ 1875 Indian Rocks Rd. S Address: Largo, FL 33774 Vice President: Address: ____ Address: _____ 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 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. Deven Werling 13.



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

DELAWARE, DO HEREBY CERTIFY "CASCLE 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 FIRST DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CASCLE INC." WAS INCORPORATED ON THE TWENTIETH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

AND SOLUTION OF THE PARTY OF TH

Authentication: 203727829

Date: 11-01-18