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NAME: KPOKOS FLILINC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KPOKOS FL II INC	
Name of corporation	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact busing	anding" and check are submitted to register the
Please return all correspondence concerning this matt	er to the following:
Taki Kaslanis	
	f Person
KPOKOS FL II Inc.	
Firm/Co	mpany
17 W 770 A POT 1111	n.t.
17 W 729 A ROSEVELLA	lress
Oakbrook Terrace, IL (
•	and Zip code
TPSCIPS + CIX Group @ pre E-mail address: (to be used	I for future appeal report politication)
E-mail address, (to be used	for future annual report nonneation)
For further information concerning this matter, please	e call:
Taki Kastanis at (1930))) 027-5250
Name of Person Area Co	ode Daytime Telephone Number
STREET/COURIED ADDRESS.	MAILING ADDRESS:
STREET/COURIER ADDRESS: Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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. K-POXOS FL II WC.

(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) 2. Illinois
(State or country under the law of which it is incorporated)
3. 82-346190
(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Trail Boca Raton, FL 33496 ROOSEVELT Rd Oakbrook Terrace, 12 40191 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Taki Kastanis Name: 5570 N Military Trail Office Address: 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.

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: TOK KOISTANIS Address: 5570 N M. V. + ary Trail Boca Ration, FL 33494 Vice Chairman: __ ______ Address: ____ Director: _ Address: ____ **B. OFFICERS** President: Taki Kastanis Address: 5570 N Military Trail Bura Ralon, FL 33496 Vice President: Address: ______ Secretary: _ 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. 13. Tak' Kastanis - president

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

File Number

7187-259-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

KPOKOS FL II INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 11, 2018, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 21ST day of NOVEMBER A.D. 2018 .

Authentication #: 1832501926 verifiable until 11/21/2019

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE

esse White