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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: THANKFUL ABUNDANG	~F		
- · · · · · · · · · · · · · · · · · · ·		must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	Good Stand	ling" and check are sub	
Please return all correspondence concerning	this matter	to the following:	
Timothy E Redman			
	Name of P	erson	
THANKFUL ABUNDANCE			
	Firm/Comp	any	
P.O. Box 100			
	Addres	s	
Carson City, NV 89702			
C	City/State an	d Zip code	
RNRDISTI@YAHOO.COM			
E-mail address: (1	to be used fo	or future annual report r	otification)
For further information concerning this matt	er, please ca	A1:	
Timothy E Redman	(916	275-2391	
Name of Person	Area Code	Daytime Telepl	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amoun	ıt:	MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
■ \$70.00 Filing Fee □ \$78.75 Filing F Certificate of S	ee & 🗇	\$78.75 Filing Fee & Certified Copy	S87.50 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.

	corporation; must include "INCORPO Corp," "Inc," "Co," or "Corp.")	DRATED."	"COMPANY." "CORPO	RATION,"		
(If name unavail	able in Florida, enter alternate corpo	rate name ac	lopted for the purpose of tr	ransacting bu	usiness in Florida)
2. Wyoming		3	46-1899640			
(State or countr	ry under the law of which it is incorp	orated)	(FEI numb	oer, if applic	able)	_
4. January 29, 2	2013	5	-			_
(Date	e of incorporation)		(Date of duration.	if other than	n perpetual)	
6				 		_
	(Date first transacted (SEE SECTIONS 607.150		Florida, if prior to registrat 2, F.S., to determine penal			
P.O. Day 100				•	- 4	/4
7 P.O. BOX 100	Carson City, NV 89702	16	47/ GLURIA	LANG	NOKKOMO	s, 1 542
<i>/</i> · 		(Principa	147/ GLURIA I office address)	LANG	Nokilomis	- 342
/	Carson City, NV 89702	(Principa	office address)	LANG	Nokilomis	<u> </u>
<i>/</i> · 	100 CARSIN CITY	(Principa	office address)	LANG	Nokilomis	- SYL
70 34	100 CARSIN CITY	(Principa	address, if different)		2018 SEC FALL	- 342
70 34	(Cur	(Principa	address, if different)		2018 SEC FALL	AP
8. Name and stre	(Cur	(Principa	address, if different)		2018 SEC FALL	APP
8. Name and stree	(Cur et address of Florida registered as Timothy E Redman	(Principa	address, if different)		2018 DEC SECRET TALLAH	APPROVED AND FILED

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 futies, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

). Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to a Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction der the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Timothy E Redman Address: P.O. Box 100 Carson City, NV 89702 Vice Chairman: Nancy A Redman Address: P.O. Box 100 Carson City, NV 89702 Director: _ _ Address: Address: ____ **B. OFFICERS** President: Nancy A Redman Address: P.O. Box 100 Carson City, NV 89702 Vice President: Timothy E Redman Address: P.O. Box 100 Carson City, NV 89702 Secretary: Nancy A Redman Address: P.O. Box 100 Carson City, NV 89702 Treasurer: Timothy E Redman Address: P.O. Box 100 Carson City, NV 89702 IOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer ne officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein : true and that he or she is aware that false information submitted in a document to the Department of State constitutes hird degree felony as provided for in s.817.155, F.S.

Timothy E Redman - Vice President

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that

THANKFUL ABUNDANCE

a profit corporation originally incorporated under the laws of **Nevada**, on **January 29**, **2013** did on **January 2**, **2016**, apply for a Certificate of Incorporation and filed Articles of Domestication in the office of the Secretary of State of Wyoming.

I FURTHER CERTIFY that this profit corporation has renounced its state or country of incorporation, and is now incorporated under the laws of the state of Wyoming and is in good standing as of the date of this certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this Wednesday, December 19, 2018.



Filed Date: 01/26/2016

Secretary of State

By: Kit Bennett