# F19000000 419

(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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SECRETARY OF STATE ALLAHASSEE FLORID!

APPROVED AND FICED

Mish

## **COVER LETTER**

TO:	CO: Registration Section Division of Corporations					
SUBJ	ECT:	SON'S REVE	LATION, INC.			
				poration	- must include suffix	
Dear S	ir or Ma	adam:				
"Certif	icate of	Existence," o		ood Stand	ding" and check are su	act Business in Florida," abmitted to register the
Please	return a	ıll correspond	ence concerning th	is matter	to the following:	
ALBEI	RTO OC	НОА				
			Ņ	Name of F	erson	
SON'S	REVEL	ATION, INC.				
			F	irm/Com <sub>l</sub>	oany	
1595 B	AYOU	COURT				
				Addre	ss	
BROW	'NSVILI	LE, TEXAS 78	521			
				y/State an	d Zip code	
ochoati	rawlers@	gmail.com				
		E	-mail address: (to	be used fo	or future annual repor	t notification)
For fu	rther inf	formation con	cerning this matter	, please c	all:	
FLOR	E ROM	AN	at (	956	838-1986	
		of Person		rea Code	-/ <del></del>	phone Number
	Regis Divisi Clifto 2661	EET/COURING tration Section on of Corpora n Building Executive Cen nassee, FL 32	ations nter Circle		Registration	Corporations 27
Enclos	sed is a	check for the	following amount:			
□ \$70	0.00 Fil	ing Fee	\$78.75 Filing Fee Certificate of Sta		\$78.75 Filing Fee & Certified 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.

1. SON'S REVEL	ATION, INC.						
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")							
не., со., с	orp, me, co, or corp.						
(If name unavails	able in Florida, enter alternate corporate na	me	adopted for the purpose of transact	ing business in Florida)			
2. TEXAS		3.	82-3579925				
(State or country under the law of which it is incorporated)			(FEI number, if a	pplicable)			
4. 11/29/2	017	5.	PERPETUAL				
(Date of incorporation)			(Date of duration, if other	er than perpetual)			
6.							
			Florida, if prior to registration)				
	(SEE SECTIONS 607.1301 & 60	7.13	502, F.S., to determine penalty liab	ility)			
7. <u>15</u> 95 BAYOU CO	*						
	(Pri	neip	pal office address)				
SAME ABOVE				<b>2</b>			
	(Current ma	ailir	ng address, if different)	19.0 19.0			
				API JAN FRETA			
8. Name and street	et address of Florida registered agent: (	(P.C	D. Box <u>NOT</u> acceptable)	PRO PRO PRO PRO PRO PRO PRO PRO PRO PRO			
Name:	CHRISTINE GALA			PH D			
0.65	1200 MAINI GENERA			VED D PM 4: 21 OF STATE E. FLORED			
Office Address:	1300 MAIN STREET			투제 <b>2</b>			
	FORT MYERS BEACH		, Florida <u>33931</u>				
	(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:		
Address:		
Address.		
Vice Chairman:		
Address:		
Additess		
Director:		
Address:		
Addiess.		
Director:		
Address:		
Addicss.		
B. OFFICERS		
[ [CSIDERIC		
Address: 1595 BAYOU COURT	SEC   I ALL	
BROWNSVILLE, TEXAS 78521	JAN	A
Vice President:	SSE - 8	PRO
Address:		0.0
Secretary: GUADALUPE OCHOA		
Address: 1595 BAYOU COURT, BROWNSVILLE, TEXAS 78521		
Treasurer:		
		<b></b>
NOTE: If necessary, you may attach an addendum to the applic	cation listing additional officers and/or dif	, colors.
12. Signature of Directo	r or Officer	11
O-5		A MILLIO HOLDER
1 4 hat he or one is all all that the or	ned in a document to the 2-p.	
The officer or director signing this document (and who is listed are true and that he or she is aware that false information submit a third degree felony as provided for in s.817.155, F.S.	tted in a document to the Department of S	State constit

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for SON'S REVELATION INC. (file number 802869877), a Domestic For-Profit Corporation, was filed in this office on November 29, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 27, 2018.



Phone: (512) 463-5555

Prepared by: SOS-WEB

David Whitley Secretary of State